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The NEWS of MGH

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Mass. General Hospital
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Detail from photo by Bradford Washburn (1956)

Massachusetts Eye and Ear Infirmary

MGH and Eye & Ear Infirmary Set Up Joint Policy Committee

The MGH and the Massachusetts Eye and Ear Infirmary moved even closer than hitherto toward effective cooperation when last June the governing boards of both institutions unanimously adopted a six-point proposal which sets up a mechanism for joint action on matters of mutual interest pertaining to patient care.

A Joint Medical Policy Committee has been formed to meet monthly and submit advisory reports and recommendations to both governing boards. The initial membership of the Joint Committee includes:

Dr. John H. Knowles, chairman; Mr. Charles T. Wood, secretary and drafter of agenda; Dr. David G. Cogan, Dr. Carl C. Johnson, Dr. Robert D. Reinecke; Dr. Harold F. Schuknecht, Dr. William W. Montgomery; Dr. Alexander Leaf, Dr. Paul S. Russell, and Dr. Nathan B. Talbot.

One major subject being studied by the Joint Committee is a low-rise wing that the Infirmary wants to build on the site of its present Gardner Building. The proposed wing would be utilized by both the ophthalmological and the otolaryngological services, and a typical floor would accommodate about 40 beds for patient care and provide from 6,000 to 8,000 square feet for research facilities. The main entrance would face north toward the John R. Macomber Quadrangle, and glass corridors would communicate with the Phillips House, the Vincent-Burnham Memorial Building, and the White Memorial Building.

Another subject for mutual study is the future disposition of the adjoining Suffolk County Jail, once that 115-year-old structure is closed and made available to both the MGH and the Infirmary.

Joint operation and proportionate financing of radiotherapeutic facilities are now being undertaken. Joint and uniform personnel policies in appropriate areas are being worked out through joint administrative communication and action.

Relations between the two institutions have been cordial ever since the Infirmary was incorporated in 1827. Dr. Edward Reynolds, a cofounder of the Infirmary, was a pupil and close friend of Dr. John C. Warren, a cofounder of the MGH. After several moves, the Infirmary settled in its present location in 1898, when Dr. J. Collins Warren was President of the Board of Managers of the Infirmary.

From 1915 until 1949 the directorships of both institutions were filled jointly by three individuals in succession (Drs. Washburn, Bigelow and Faxon). When Dr. Nathaniel Faxon retired in 1949, the two hospitals reverted to the policy of having separate directors, with Mr. Francis S. Hill filling the MEEI position. When the latter retired on December 31, 1965, Mr. Charles T. Wood was elected to fill his place.

In 1920 the professional staff of the

Fabian Bachrach

Charles T. Wood, Director

Infirmary became ex officio members of the MGH staff, which in turn acts as consultants to the Infirmary. When the Connecting Building was built in 1927, outpatient departments were set up therein under the joint administration of both hospitals.

Concerning future MGH-Infirmary

Continued on Page 8

Per Diem Inpatient Costs at MGH

ROUTINE COSTS:	1964	1965
Maintenance, building and laundry services; administrative and business offices, etc. — comparable to hotel costs	5.80	6.36
Meals and special diets	4.85	5.13
General nursing services	11.10	11.89
Student nursing services	2.26	2.43
House officer services	2.48	2.52
Depreciation of plant	.45	.45
Other routine costs	4.05	4.59
	$30.99	$33.37
ANCILLARY COSTS:		
Operating room	5.54	6.24
Anesthesia	2.47	2.67
Radiological diagnosis and treatment	2.90	3.57
Laboratory and pathology services	5.26	6.03
Electrocardiograms	.31	.34
Physical therapy	.41	.50
Medical supplies	.65	.66
Drugs	1.57	1.75
	$19.11	$21.76
ROUTINE AND ANCILLARY COSTS	$50.10	$55.13

Dr. Rabkin Becomes Director at BIH

The MGH Medical Services are proving to be a wellspring of hospital directors. Within the past four years, four of its members have been appointed general directors of teaching hospitals associated with the Harvard Medical School: **Dr. John H. Knowles** at this hospital (1962), **Dr. Leonard W. Cronkhite, Jr.,** at the Children's Hospital Medical Center (1962), **Dr. John G. Freymann** at the Boston Hospital for Women (1965), and now **Dr. Mitchell T. Rabkin** at the Beth Israel Hospital (July 1, 1966).

Dr. Rabkin became an intern at MGH in 1955, following graduation from HMS. After two years at the National Institute of Arthritis and Metabolic Diseases, he returned to MGH and advanced to the chief residency in medicine. In 1963 he joined the Active Staff and subsequently became acting chief of the Endocrine Unit. At Harvard he is an associate in medicine. His predecessor at the Beth Israel was Dr. Sidney S. Lee, who on July 1, 1966 became Associate Dean for Hospital Programs at HMS.

On October 1, Dr. Rabkin imported **Dr. Edwin W. Salzman** of MGH to assume the post of associate director of the surgical service at BIH. As assistant director of the MGH Blood Bank for several years, Dr. Salzman conducted what Dr. Rabkin calls "a brilliant research effort on problems of bleeding and clotting." A book by Dr. Salzman and his associate Dr. Anthony Britten, *Hemorrhage and Thrombosis,* was reviewed in the January 1966 issue of *The NEWS of MGH.*

The NEWS of MGH

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Lawrence E. Martin

Comptroller Martin Given AAHA Award

Mr. Lawrence E. Martin, Associate Director and Comptroller of MGH, received the annual Frederick C. Morgan Individual Achievement Award of the American Association of Hospital Accountants at its 20th anniversary banquet last June at the University of Chicago. This award acknowledged Mr. Martin's "significant contributions to the field of hospital accounting and financial management."

Mr. Martin earned the master's degree in business administration at Boston University. He came to the MGH in 1949 as a cost accountant, and within two years was appointed Comptroller. He has been chairman of several committees of the Massachusetts Hospital Association, including its Council of Blue Cross Affairs, and has participated in the development of a cost manual published by that association.

Mr. Martin was president of the Massachusetts chapter of the American Association of Hospital Accountants in 1962-63, and became a Fellow of the AAHA in 1962. He received the William G. Follmer Merit Award for chapter activity in 1964.

Mr. Martin has been in charge of setting up the Medicare and Medicaid programs at MGH, and has been Dr. John Knowles's chief lieutenant in the hard-hitting campaign for equitable hospital reimbursement rates both at MGH and in the state. Every member of the Staff can participate in this campaign by explaining the essentials of hospital costs and charges to patients. They are entitled to know.

Elliot Richardson Drafts State Plan For Medicaid Area

Lieutenant Governor Elliot L. Richardson, a former member of the MGH Board of Trustees, has been the chief architect of the Massachusetts Medicaid plan (Title 19), approved on October 18, 1966 by the U. S. Department of Health, Education, and Welfare. In 1965 Governor John E. Volpe had delegated to Lt. Gov. Richardson the primary responsibility for designing and coordinating multidepartmental state programs in the field of health, education, and welfare.

Under the approved plan the Department of Public Welfare will administer the Medicaid programs, and the Department of Public Health will be responsible for the quality, efficacy, and utilization of these programs. Any unresolved differences of opinion between these two departments will be referred to the Medicaid Advisory Council for decision.

Lt. Gov. Richardson has earned a national reputation as an expert in HEW legislation. He was Assistant Secretary for Legislation in the U. S. Department of Health, Education, and Welfare from 1957 to 1959, and on occasion was Acting Secretary of the Department. He was U. S. Attorney for Massachusetts from 1959 to 1961. In 1963 he was general chairman of the Greater Boston United Fund campaign. Upon being elected to his present public office, it was necessary for him to resign from the MGH Board of Trustees, whereupon he was elected to the MGH Corporation.

Lt. Gov. Richardson headed the large task force which drafted bipartisan legislation to set up a state program of 37 regional mental health centers, each center to be governed by a blue ribbon board of citizens, and the entire program to be supported by federal matching funds. Unfortuately, this bill (S.889) was killed during the "flurry of inaction" (to quote the *Boston Globe*) in the final drive for prorogation of the Legislature.

In a related area, Lt. Gov. Richardson drafted the Community Services Act, which was introduced in both branches of Congress last May. This legislation, if passed, would put the federal government in partnership with the states in setting up multiservice community centers. In this connection he promoted the establishment of the demonstration multiservice center in Brockton, Massachusetts, where citizens in need of assistance may find health, welfare, and rehabilitation agencies under one roof.

One proposal made by Lt. Gov. Richardson merits more consideration than it has received. On August 20 he issued a comprehensive statement on the proposed state Medicaid plan, two days before the opening of joint legislative hearings on that subject. His statement included a plea for the establishment of a new state department of health and welfare which would consolidate seven existing agencies: the Department of Public Health, the Department of Public Welfare, the Department of Mental Health, the Massachusetts Rehabilitation Commission,

Lt. Gov. Elliot L. Richardson

the Division of the Blind, the Massachusetts Commission on Aging, and the Commonwealth Service Corps.

Such an all-inclusive agency is necessary, the Lieutenant Governor believes, in order for the state to administer effectively its multiservice health and welfare program. "With our present system of several hundred scattered and fragmented municipal public health and public welfare agencies, this challenge is going to be exceedingly difficult for Massachusetts to meet."

He added: "A single administrator backed up by a small but highly competent staff and guided by a broadly based advisory commission would have the necessary tools to assure better planning, better coordination, better communication, and more economical administration than is now possible."

He pointed out "a radically new kind of responsibility" incumbent upon state departments of health. "Whereas in the past they have largely been preoccupied by environmental and preventive health problems, they must now go about the complex task of forming 'coalitions of resources' among public and private agencies."

Lt. Gov. Richardson's statement also referred to hospital reimbursement rates: "Will the Commonwealth, under Title 19 [Medicaid], be forced to pay the same rates for hospital care as are paid by the federal government under Medicare [Title 18]? Quite clearly the answer should be affirmative, and if that is the final answer, the whole controversy over hospital rates which has recently agitated the special Senate committee to study hospital costs and charges will be blown right out the window."

His statement included a summary of the state Medicare program, which began last July 1: "In the case of Medicare, our success has been substantial. In numbers of certified hospital beds, nursing home beds, and in percentage of the population covered by certified home health services, we are far above the national average — over 99 per cent of our hospital beds, an estimated 40 per cent of our nursing home beds, and, in the case of home health services, 98 per cent of our population are covered. And with respect to participation of the elderly in the optional medical benefits program, cooperation between the Department of Public Welfare and the Social Security Administration has brought Massachusetts to the very top among the 50 states. Effective leadership by the Department of Public Health, meanwhile, enabled our hospitals, nursing homes, and home health services to get the program off to a smooth start last July 1."

Although not a doctor himself, Lt. Gov. Richardson's participation in state health planning and in MGH affairs have given him an unusual opportunity to carry on the medical tradition of his family. His brothers Edward and George are active members of the MGH Staff; his father Edward was Chief of the West Surgical Service at MGH; and his grandfather Maurice held the title of Surgeon-in-Chief at the MGH.

Ether Day, 1966

The MGH observed Ether Day 1966 by awarding its Service Pin to 270 members of the hospital family for loyal service ranging up to 40 years. Mr. Phillips Ketchum, Honorary President and Trustee of MGH, delivered greetings to the numerous guests in the Moseley Auditorium. The principal speaker was Dr. John H. Knowles, General Director, his subject being "The MGH and Medicare." During the pin ceremony Dr. Ellsworth T. Neumann, Administrator, presented the candidates to Dr. Knowles.

G. M. Kober Medal Awarded to Dr. Aub

Dr. Joseph C. Aub, former director of the J. Collins Warren Laboratories of the Huntington Memorial Hospital of Harvard University, and now a member of the MGH Board of Honorary Physicians, has received the 1966 Kober Medal of the Association of American Physicians. The presentation of the award was made to Dr. Aub last May 5 in the Ether Dome of MGH by Dr. Paul C. Zamecnik, present director at the Huntington.

This medal is given annually to some member of the AAP whom the membership desires most to honor for his original contributions to scientific medicine. The award was endowed in

Joseph C. Aub, MD

1925 by Dr. George M. Kober, who had migrated from Germany to America in 1867 as an uneducated youth and eventually became professor of hygiene and state medicine at Georgetown University and dean of its medical school.

Dr. Zamecnik's presentation speech, sprinkled with scholarly good humor, gave a veritable life history of Dr. Aub. It will be published in the transactions of the AAP.

Dr. Aub began his MGH career as a medical intern in 1914, following graduation from the Harvard Medical School. After serving with Army Base Hospital 6 (the MGH unit) in France, he was appointed to the Medical Service at MGH and the Department of Medicine at HMS, where he caught the eyes of Walter Cannon and Cecil Drinker. In 1924 Dr. J. Howard Means, Chief of the MGH Medical Services, selected Dr. Aub to be the first clinical investigator to utilize Ward 4, the new metabolic research unit. Concerning this period Dr. Zamecnik stated in his speech: "The age of physiological medicine was just beginning, and in Joseph Aub and his classical studies of calcium and phosphorus metabolism this period of medicine came into full flower."

In 1928 the Harvard Cancer Commission appointed Dr. Aub to succeed Dr. George R. Minot as director of the Huntington Memorial Hospital, then located beside HMS. Dr. Aub also joined the medical service of the Peter Bent Brigham Hospital. Dr. Zamecnik stated:

"Dr. Aub proposed to attack the [cancer] problem in a fundamental way, and to regard cancer as an aberration in growth control. This was a bold course on which to set an entire laboratory effort, since it involved a search for normal control mechanisms as well, and short-range relevancy of such studies to the cancer problem was not immediately apparent. . . . A generation passed before this forward-looking but difficult point of view met general acceptance among the cancer research laboratories of the world."

Just before American involvement in World War II, Dr. Aub and his laboratories migrated to MGH, where he was again appointed to the Medical Services. He was also appointed Professor of Research Medicine by HMS, and later the chairman of the Department of Medicine.

After his statutory retirement in 1956, Dr. Aub was given laboratory space in the Warren Building and he began a fresh study of the surface of the tumor cell. Dr. Zamecnik said that his investigations "now point a finger at chemical reactions at the cell surface which may help to explain the little understood phenomenon of loss of contact inhibition which has lately come to be regarded as one of the hallmarks of malignancy."

Dr. Aub's inquiring mind once led him into the newly opening field of radiobiology. In 1936 he and Dr. Robley Evans of MIT engaged in an investigation of radium excretion which Dr. Zamecnik described as having "lighted the first therapeutic candle for the atomic era."

Dr. Aub has participated in numerous medical missions of national and international scope, and has served as an officer in several scholarly societies. His membership in the National Academy of Sciences is distinctive, for not many physicians are admitted to that learned body.

The AAP made a good choice.

The Countway Library of Medicine is currently exhibiting 24 early American medical imprints ranging from 1702 to 1820. The exhibit was prepared by Mrs. Robert C. Cantu, HMS reference librarian, whose husband is an MGH neurosurgical resident. It includes the only surviving copy of the second printing of Thacher's *Brief Rule* (Boston, 1702), a copy of the first issue of the first American medical journal, *The Medical Repository* (1797), and a copy of the first official American pharmacopeia (Boston, 1820).

In the photograph below, Dr. Stanley P. Bohrer, formerly of MGH, plays the West African board game of ayo with two friends in Ibadan, Nigeria, where he served 16 months as visiting lecturer in radiology at the Ibadan University College Hospital. He wears a jacket made from locally dyed adere cloth. A pair of Ibeji dolls and two calabash rhythm instruments stand on a camel blanket draped over a bookcase. An account of Dr. Bohrer's experiences in Nigeria appeared in the Aug. 15, 1966 issue of The Journal of the American Medical Association.

A Letter from Da Nang

The following was excerpted from a handwritten letter sent by Dr. Gerald S. Moss to Dr. Charles E. Huggins last spring from Vietnam, where Dr. Moss conducted a successful field trial of the Huggins Cytoglomerator. An article on this apparatus for storing frozen blood appeared in the November 1964 issue of The NEWS of MGH. *Dr. Huggins is a member of the MGH Surgical Service and Assistant Director of the Blood Bank and Transfusion Service.*

As I sit here in the Mobile Frozen Blood Bank at the Station Hospital, Da Nang, South Vietnam, my mind wanders back over my year away from home. In 1963 I had accepted a staff position on the surgical service of NIH, to begin when my MGH residency was over in 1965. However, Vietnam changed all that, and the U. S. Navy decided to send me there as a surgeon. I was also to look after the Frozen Blood Feasibility Study, which was soon to commence in Da Nang.

In July 1965 I reported to the Naval Hospital in Chelsea, Mass. and spent ten days reviewing the frozen blood picture. I learned that frozen red cells had been studied minutely both at Chelsea and at MGH. These cells could be stored for long periods of time, and in addition represented universal donor cells. Their desirability in a combat military hospital seemed clear-cut, but on-the-spot observations would have to be made. The Navy had adopted the method for the addition and removal of the glycerol from the red cells as developed by Dr. Huggins at MGH.

After a training period at Camp Pendleton, California, I left for Pearl Harbor. After a pleasant interlude there, a Boeing 707 jet carried me to Saigon. It was about 8 a.m. as we flew over the delta area at the southern tip of the country. The landscape was flat and emerald green. It was divided into small rice paddy fields, separated by raised earthen walkways. Everything appeared quiet and peaceful, but I noticed that the pilot maintained a high altitude until the last possible moment and then practically dove into the airport. I must admit a certain amount of nervousness as I disembarked from the plane, but to my delight there was not a single VC sniper waiting to to shoot at me.

The next three months were spent at the navy hospital in Saigon waiting for the Da Nang hospital to be completed. The doctors, nurses, and corpsmen there were all first-rate people, but regarded me suspiciously as "the frozen blood man." The fact that I was also a surgeon left everyone a little confused. I was both startled and elated to find out that I wasn't going to live in a tent. Instead, all the medical officers were quartered in air-conditioned apartments, which had two bedrooms, kitchen and living room. I had as a roommate a psychiatrist named Dick Gettman, who turned out to have trained in Boston.

We had a delightful Chinese maid named Loi, who weighed 80 pounds and did the marketing, cooking, cleaning and laundering. Her husband was in the army, and she was the sole source of income for her parents, her husband's parents, and her three children. On Friday nights she prepared authentic Chinese feasts for us, which were eaten with chopsticks and were a culinary delight.

In December I flew up north to Da Nang to set up the frozen blood program. The station hospital was being built on the sandy beach beside the South China Sea. It encompassed about 40 acres and would eventually consist of a number of air-conditioned Quonset huts. Two vans from California had been converted into a blood processing unit and a laboratory unit.

Working with me were Ensign Jim Bates, Chief Irving, and two corpsmen, Roger Larouche and Ken Fowler. The first thing we did was to surround the vans with what appeared to be about 100,000 sand bags — perhaps just a little less. Our defense perimeter consisted of a thin barbed wire fence and six bunkers. The entire complement of the hospital at that time consisted of 4 officers and 36 corpsmen. We were surrounded on three sides by military camps, but on the fourth side was a small valley with a hostile VC village.

The first night I remember being a little apprehensive as the sun settled. As soon as it became dark, illumination flares were fired in the air by American Marines positioned in our vicinity. About midnight I was lying in bed with my boots on, weapon at my side, when suddenly a great deal of small arms fire could be heard at close range. A siren went off in the distance, which signified an attack was imminent. We leaped out of bed and ran to the command post bunker. It was raining. After about two hours of waiting and waiting, the all clear sounded and we collapsed into our beds. The siren rarely went off after that first night.

The hospital opened on January 10, and Commander Brodine from Chelsea had already joined us to set up the frozen blood program. Soon we had the opportunity to use the frozen cells. A Marine had received 18 units of standard blood, while an attempt was made to repair a severed femoral artery. Postoperatively he was still in shock and required more blood. However, all of our remaining blood was incompatible, and so we thawed a unit of frozen cells. The cross-match was compatible, and we gave him 19 units of frozen cells. I have no doubt that the frozen blood saved his life.

Gerald S. Moss, MD

Since then, the frozen cells have been used many times. I believe that we proved that blood cells can be successfully transported from the USA to a far distant point, that the Huggins cytoglomerator worked satisfactorily under field conditions, and that the frozen cells are effective in treating hemorrhagic shock.

Now as the year draws to a close, I am pleased with what I have done and humbled by what I saw. The pressures, decisions, and experiences while working with the frozen blood have been stimulating and worthwhile.

Dr. Moss is now working for one year at the Naval Medical Research Institute, NIH. He was replaced at Da Nang by Dr. Frederick A. Ackroyd, who finished his MGH surgical residency in 1963.

Dr. Dwight L. Siscoe, an Honorary Physician of MGH, died last August 15 at the age of 77. He graduated from HMS in 1919, interned at MGH, and then took another doctorate at the Harvard School of Public Health. After 1924 he concentrated on the treatment of diabetes at MGH and the Joslin Clinic of the Deaconess Hospital. He was a Fellow of the American College of Physicians.

Dr. Jerome Gross, biologist at MGH and HMS, and **Dr. Alexander Leaf,** Chief of the Medical Services, MGH, and Jackson Professor of Clinical Medicine, HMS, have been elected to membership in the American Academy of Arts and Sciences.

Edna S. Lepper, RN

Ruth Sleeper, RN

Natalie Petzold, RN

Nursing Leadership Changes Hands

A brilliant chapter in the history of MGH nursing closed last September 9 with the retirement of Miss Ruth Sleeper from the directorships of the Nursing Service and the School of Nursing, both of which she had assumed twenty years ago. A new chapter began on the same date with the appointments of Miss Edna S. Lepper as Director of the Nursing Service and Miss Natalie Petzold as Director of the School of Nursing.

A well attended reception in honor of Miss Sleeper was held on August 31 in the Walcott House. A citation was presented to her by Dr. Ellsworth T. Neumann, Administrator:

"To you, Miss Ruth Sleeper, I have the privilege of presenting this citation from the Hospital on behalf of the Trustees and the Administration. During your 33 years of close association with the Nursing Department, and its Director since 1946, you have devoted your professional ability and many talents to the development of the School of Nursing to its present high standards; and in partnership with Miss Lepper, you have brought the Nursing Service to its highest peak of strength and capacity in its long history. Your understanding leadership in nursing and nursing education has been international in scope, and has brought many richly deserved honors to you and added prestige to the MGH. Steadfast to your high ideals, you have combined grace and charm with a firmness of purpose that have won for you our deep respect, sincere admiration, and abiding affection."

Miss Sleeper graduated with the MGH Class of 1922, and earned the B.S. and M.S. degrees at Teachers College, Columbia University. She returned to MGH in 1933 to become Assistant Superintendent of Nurses and Assistant Principal of the School, when Miss Sally Johnson was in charge. Thus she was well prepared to succeed Miss Johnson upon the latter's retirement in 1946. Miss Sleeper was the first nurse to be appointed to the General Executive Committee.

Miss Sleeper has received these honorary degrees: L.H.D., Boston University (1953); D.Sc., Hood College (1954); D.Sc., Wheaton College (1960); and D.Sc., Albany Medical College (1964). In 1959 she received the Florence Nightingale Award, which is given annually in an international competition to a nurse "of superior dedication."

Miss Lepper, likewise an MGH alumna (1926) and a graduate of Teachers College, Columbia University (1938), became Associate Director of the MGH Nursing Service at about the same time Miss Sleeper became Director. Miss Lepper is presently Assistant Professor of Clinical Nursing at Boston University and a member of the Board of Governors of the Human Relations Center in the same institution. She is active on several committees of the Greater Boston Hospital Council and president of District no. 5, Massachusetts Nurses Association. She has succeeded Miss Sleeper on the MGH General Executive Committee. In these days of nurse shortages and increasing nursing workload, it is indeed fortunate that Miss Lepper is available to apply her vast experience to such problems at MGH.

Miss Petzold is the first Director of the Nursing School not to head the Nursing Service, a fact which points out the growing complexity of nursing education. She graduated in 1948 from Simmons College with the B.S. degree and a diploma from its school of nursing. She received the M.S. degree in 1960 from Boston University. She has been teaching at MGH since 1948, and in 1961 became Assistant Director of the School.

Dr. John Knowles, General Director, has stated: "Hospital diploma schools are being closed while new ones are being developed under the aegis of universities and colleges. At the moment, however, three quarters of the nurses in this country are supplied by the hospital-based schools. The MGH is dedicated to the improvement and strengthening of its School of Nursing, and the future will see our efforts concentrated in this direction. Miss Petzold is dedicated to these values and will be responsible for shaping the future of the MGH School of Nursing. New avenues and patterns of nursing education will be explored, and many resources existing in the Hospital and in the community will be drawn upon."

Dr. Knowles's remarks are reinforced by the following statement from the current catalog of the MGH School of Nursing: "The field of nursing is still fluid; new trends are constantly presenting new demands and new challenges."

Coordinated Program Of Nursing School Closed Reluctantly

The retirement of Miss Sleeper coincides with the closing of a highly regarded educational program that began when she first assumed the directorship of the School of Nursing, twenty years ago. Known as the Coordinated Program, it was conceived somewhat earlier by Miss Sally Johnson when Miss Sleeper was her assistant. Both had recognized clearly the need to raise nursing education from the vocational to the professional level, a need arising from the increasing application of medical science to clinical practice.

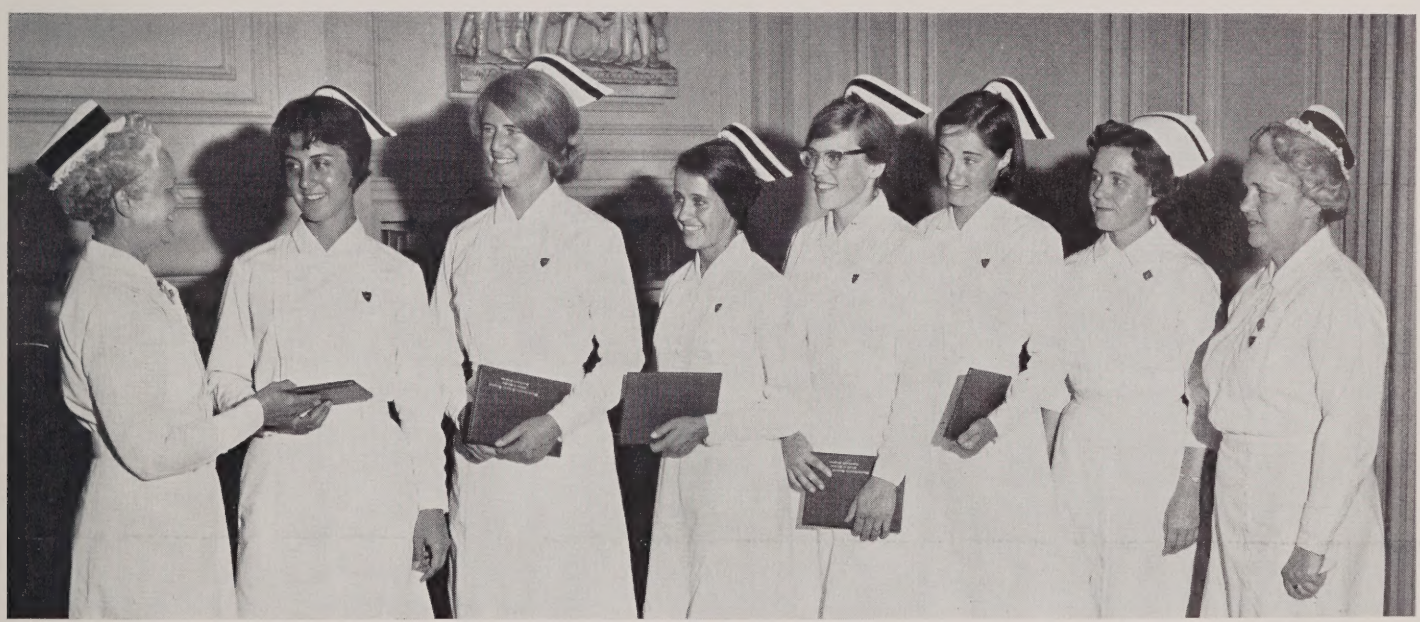
The Coordinated Program was essentially a two-year postbaccalaureate program in professional nursing made available first to students enrolled in Radcliffe College, and later to qualified graduates of other liberal arts colleges who would otherwise not be attracted to the three-year plan offered by nursing schools conducted by hospitals. The reason for closing the Coordinated Program is explained thus by its chairman, Miss Sylvia Perkins, RN:

"Efforts to raise the standards of education and practice in nursing have lagged behind those of related groups. Educational institutions which offer programs in nursing beyond the baccalaureate level use the standards accepted by their college or university for all departments. Accreditation by the professionally accepted organization is only one evidence of a school's educational standards. However, it is used widely as one criterion for evaluating the credentials of an applicant who wishes to undertake advanced study.

"Unfortunately, the Coordinated Program has not been able to qualify for accreditation. The National League for Nursing requires that the responsibility for a college program in nursing must be assumed completely by a college or university. Radcliffe College was not in a position to take such responsibility. Education for professional nursing has not yet been established with the academic base of a degree in liberal arts, and so the strength of the basic education of the students in the Coordinated Program carries less than full weight at present.

"Another effort made to raise standards is to establish grades of employment with appropriate salary levels. Public health nursing agencies recognize the graduate of an accredited baccalaureate program in nursing as the one best prepared for the practice of public health nursing.

"Some of the graduates of the Coordinated Program were accepted by some universities for advanced study when the results of placement examinations and the curriculum of the Program were reviewed. Some public health agenices employed them as fully prepared public health nurses. Nonetheless, it was seen that it was unfair to the graduates of the Coordinated Program to prepare them at a superior educational level and yet for the Program to be unable to meet all of the criteria for accreditation. Reluctantly, it was decided to terminate the Coordinated Program — at least in its existing form and for the present."



THE ABOVE PHOTOGRAPH shows Miss Ruth Sleeper, Director Emerita of the School of Nursing and the Nursing Service, presenting diplomas to five members of the last graduating class of the Coordinated Program in a ceremony held on September 2, 1966, in the Walcott House.

LEFT TO RIGHT: Miss Sleeper; Elizabeth Gramlich, B.A., Mt. Holyoke, 1964; Anne Morgan, B.A., Wellesley, 1963; Margaret Earle, B.A., Radcliffe, 1964; Anne Keith, B.A., Radcliffe, 1964; Katherine Murray, B.A., Wellesley, 1964; Henrietta Golec, Senior Clinical Instructor; and Sylvia Perkins, Chairman of the Program.

The MGH School of Medical Illustration graduated **Tehrie Holden,** M.F.A. (Fordham), and **Kathryn Reinhardt,** A.B. (Univ. of Kansas) last June 17. Miss Holden is now working with Mildred Codding, surgical artist at the P. B. Brigham Hospital; and Miss Reinhardt is working with William Osburn, medical art director at the W. B. Saunders Company, medical publisher of Philadelphia.

Mr. John J. Fields, who has contributed numerous excellent photographs to *The NEWS of MGH,* is no longer with us. He had been working under **Dr. Stanley Bullivant** in the Electron Microscopy Laboratory, but now they are both members of the department of microbiology at the University of Auckland, New Zealand. However, Mr. Field's photographs will appear in future issues.

The Editorial Board of *The NEWS of MGH* extends thanks to all subscribers who mailed in invoice forms with enclosed checks for $3 subscriptions and contributions, some of the latter amounting to as much as $25 or $30. Checks are still coming in at this late date, and so a summary report is postponed until the next issue of *The NEWS.*

MGH Medical Photography Unit

From left: Drs. Russell, Knowles, Glaser and Ebert

Another Volume of Lowell Lectures Is Released by Harvard

The MGH Lowell Lectures of 1965 were presented again in the form of a book released to the reading public on October 10, 1966 by the Harvard University Press. The title of the book is *The Teaching Hospital: Evolution and Contemporary Issues.*

The four lecturers in this series were: Dr. Robert J. Glaser, President of the Affiliated Hospitals Center, Inc., and Professor of Social Medicine, HMS; Dr. Paul S. Russell, Chief of the Surgical Services, MGH, and Homans Professor of Surgery, HMS; Dr. Robert H. Ebert, Chief of the Medical Services, MGH, and Jackson Professor of Clinical Medicine, HMS; and Dr. John H. Knowles, General Director and Physician, MGH, and Lecturer on Medicine, HMS.

(Dr. Glaser subsequently left Boston to become Vice President for Medical Affairs and Dean of the School of Medicine at Stanford University; and Dr. Ebert, on July 1, 1965, became Dean of the Faculty of Medicine at the Harvard Medical School.)

The reason for selecting the teaching hospital as the subject of the 1965 Lowell Lectures is summed up in the introduction to the book by its editor, Dr. Knowles:

"The hospital as health center now provides one of the best social and technical instruments available to the profession and to the community for the solution of the medical care problems of somatic, psychic, and social dis-ease, as well as the companion problems of rising costs and expectations. Unfortunately, the doctor still views the hospital as *his* host, and the public views it through the glasses of misinformation (or lack of information), fear, and financial hardship.

"The hospital provides the platform where the profession meets the public. The 'public' includes patients, expanding state and federal medical care plans (Hill-Burton; Medicare; Heart Disease, Cancer and Stroke Law), Blue Cross and commercial insurance companies, organized consumer unions, organized medicine in the form of state and national medical societies (the American Medical Association, American College of Radiology), political representatives, and so on. The hospital finds itself occupying the central position amidst these forces, some fighting for short-term selfish interest, but all looking with rising hopes and expectations to the institution. Better understanding of the hospital, its historical evolution, its present problems, and its obligatory role as a social instrument is necessary if the medical profession and the local community wish to keep the use of this instrument in their own hands. Change in all these forces which influence and shape the medical world demands that the medical curriculum change and that the profession change with it."

We look forward to still another volume — the 1966 Lowell Lectures.

Infirmary . . .

Continued from Page 1

relations, Dr. John Knowles has stated:

"We are all aware of the unique qualities of the two institutions and the crucial importance of maintaining the clear identity of each. Both can continue to enjoy a healthy and necessary degree of autonomy within the framework described above — crucial to the individuals involved and to their best efforts. Where appropriate, joint action can only serve to improve and enhance the excellence of our common concerns — the care of the sick and injured, the teaching of students, and the researching of the cause and effect of disease."

Treadwell Library

The Ida and George Eliot Prize Essay Award is a mark of distinction in the medical library field. The 1966 winner was a brochure entitled *Medical Library Careers* and produced last year by the Medical Library Association's Subcommittee on Recruitment, of which Miss Genevieve Cole, Treadwell Librarian, was chairman. She received the Eliot Award on behalf of her committee at the 65th annual meeting of the Medical Library Association, held in Boston last June.

This brochure was judged to have done most to promote the profession of medical librarianship. It portrays the medical librarian as a specialist utilizing modern techniques of bibliographic processing and retrieval to bridge the gap between the physician and the up-to-date scientific information he needs.

The Medical Library Association (MLA) was founded in 1898 with 65 charter members, and now numbers more than 2,000 members, including about 150 in other countries. Its original purposes were to foster the growth of medical libraries and to maintain a duplicates exchange program. Miss Grace W. Myers, the first full-time MGH librarian (appointed in 1897), wrote an article on the Treadwell Library which was published in the March 1899 issue of *Medical Libraries,* the first organ of the MLA.

The functions of the MLA have since been extended to the setting of medical library standards and the professional certification of medical librarians. Its headquarters is in Chicago. Miss Cole currently holds the office of MLA Secretary.

The MLA took an active role in securing passage of the Medical Library Assistance Act (PL 89-291), which was signed by President Johnson on October 22, 1965.

SB for Alumnae MIT Quarterly

AN EMERGING PROGRAM IN NURSING

Among the young women who have come to the Massachusetts General Hospital to study Nursing, there is one group whose history differs from the rest even though the relationship with the School of Nursing is a close one. These students are members of the Coordinated Program conducted jointly by Radcliffe College and the Massachusetts General Hospital School of Nursing. Some of the alumnae know the past and present of this program; others certainly may not.

Before Miss Johnson retired, diligent efforts were made to find a suitable college association for our School. Several were interested but for suitable reasons Radcliffe College was the one to launch with this School what Mr. Everett C. Hughes in his 1958 study called an "almost unique experiment of cooperating in a program by which young women would achieve both a full liberal arts education and professional competence in nursing." (1)

The original plan called for students to be admitted by a joint Admissions Committee to both institutions. The student pursued whatever liberal arts program she chose without being obliged to shape her program to nursing requirements beyond a course in Inorganic Chemistry and one in Child Growth and Development. It was often possible for the deans of instruction at Radcliffe to suggest courses that were considered enriching for nursing when the student had questions about her program. Meanwhile, during most terms, these students carried one extra course at the School of Nursing toward the preclinical requirements.

(1) Hughes, E. C., Study of Coordinated Program of Radcliffe College and the Massachusetts General Hospital School of Nursing, 1958.

In the first years, there were two summer sessions each of eight weeks, one for Anatomy, Physiology, Organic and Biochemistry, and the second for Introduction to Nursing Care.

With hindsight, factors that influence selection and direction stand out in a light different from the view ahead. In 1950, the first students, after obtaining the Bachelor of Arts degree, were due to enter the two clinical years in Nursing. Their program ~~has~~ included Medical-Surgical Nursing at the Massachusetts General Hospital, Psychiatric Nursing at McLean Hospital, Obstetric Nursing at Boston Lying-In Hospital, Pediatric Nursing for most years at the Children's Medical Center, Public Health Nursing with courses at Simmons College and field experience in Boston agencies, and an advanced clinical experience back at the Massachusetts General Hospital. Later, when it became available to several collegiate programs in New England through generous sharing by the Boston University School of Nursing, six weeks experience in Tuberculosis Nursing ~~at~~ included at the Veterans' Administration Hospital in Rutland Heights, Massachusetts. ~~Even in~~ During the nine years, there have been made many ~~changes deemed~~ improvements of various kinds.

Simmons College School of Nursing, as most of you know, has sent some or all students to the General for Medical and Surgical Nursing. Until the Coordinated Program was started, Simmons students were combined with our diploma program students despite differences in age and background. It was considered only right to invite Simmons to have their students join the Coordinated Program at the time of Medical-Surgical Nursing. The curriculum was being designed for students with college level background and taught by clinical faculty employed for

this program only. So, the two groups came together. It became feasible eventually for both groups to share in a summer session in which Introduction to Nursing was taught. Since this meant that in two summers students were unable to earn or to travel, plans were made to put this content into the academic year. It will be realized that to try to meld two groups from different institutions and different programs was more ambitious than rational. Moreover, as the faculty of each program tried to improve the sequence and quality of educational experiences, each one suffered from the needs of the other. Lest this be misconstrued, it should be said that the joint efforts of Radcliffe-Massachusetts General Hospital and Simmons faculty provided many improvements and many happy associations for students and faculty alike. That no man can serve two masters became increasingly evident even when the advantages derived from such plans were considerable from the standpoint of costs, use of instructor time, and the like. Gradually, the separation is coming to pass. The reasons are educationally sound for both groups.

The challenging opportunity to become acquainted and to work with the Radcliffe students has had vast rewards. Many people tend to think of college girls, Radcliffe College girls, in stereotypes involving social background, financial advantages and intellectual endowment to itemize a few. For the sixteen who have graduated from the program, not one factor is common to all, except that each has been a stimulating person. It is a very exciting experience and one needed in nursing education to work with students mature and judicious in the evaluation of their educational experiences and frequently

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Two suggestions were acted upon. It was agreed mutually that after September 1959, students would no longer be admitted jointly to the Program as freshmen at Radcliffe. For those students enrolled, the Program would be continued with whatever changes were ~~indicated~~ advisable. The study indicated quite conclusively that college graduates interested in nursing should be the future focus.

Since the termination of the School of Nursing at Yale University, the opportunities for college graduates have diminished significantly. Inquiries were being received by both Radcliffe and the Massachusetts General Hospital concerning such programs.

It was decided to admit graduates of colleges other than Radcliffe, providing the student met admission qualifications and a program based on her liberal arts background could be worked out. Without recruitment, four students were admitted. They started in the science summer session, in which they studied courses in Anatomy, Physiology, Organic and Biochemistry. Other preclinical requirements are being met according to needs. For example, tutorials are being given in Principles of Nutrition and Microbiology. Because of the need of all for content in the Behavioral Sciences, two courses are being given under the direction

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of Dr. Lindeman of the Department of Psychiatry here. Fundamentals of Nursing, Survey of Nursing and Medical-Surgical Nursing have been redesigned and form part of a whole. ~~Subsequently~~ Currently, each area of the curriculum is to be studied with an eye to the future. What challenging questions we are dealing with! How interesting it is to work out various solutions in an effort to determine what is the best possible curriculum for the graduate of a sound liberal arts program.

Together with the graduate from the regular program with Radcliffe, these young women now have their own identifying uniform and cap. When the whole group was in residence at the Massachusetts General Hospital this last summer, it was decided that since the program was changing it was no longer desirable or right to be identified by the regular Massachusetts General Hospital student uniform. A committee of students, with some help from the Coordinated Program faculty and the representative of the uniform company, designed a dress and cap according to what their ideas of a uniform should be. The dress is a lovely shade of blue, with while collar and set-in bib, and a ten-gore skirt. A narrow self-belt with covered buckle is used. White shoes and stockings are worn. The cap is of double thickness fine white organdy. It can be opened out flat for packing and is secured by two tiny studs. Heretofore, the graduates of the Coordinated Program have worn a narnow crimson band on the black velvet band. Students and faculty are still considering what may be best for the band and the design of a pin. In the accompanying photograph you will see Miss Sleeper at the Capping held after a student-faculty dinner attemded by Radcliffe undergraduates, graduates and the students presently enrolled from Connecticut

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College, University of Massachusetts and Wellesley College.

In the clinical years, students may live at home, in an apartment, or in the dormitory. Privileges are unrestricted for college graduates. The students are finding the Program challenging and their interest in nursing sustained. They have received many favorable comments about their uniform. The calibre of their nursing care and their sense of responsibility in various situations has been noted by many. Every effort is being made to realize a judicious balance between wisely selected clinical experiences and academic study of nursing on a level of which college graduates are capable. While we are attempting to find appropriate designs, the future of the Program is still under study.

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The NEWS of MGH

Vol. 26, No. 1 Boston, Massachusetts January-February 1967

MGH Cyclotron Will Accelerate Investigation by Pulmonary Unit

The installation of a medical cyclotron in the Pulmonary Function Laboratory of the Department of Medicine will mark a new phase in radioisotope research at the MGH. However, the history of the development of radioisotope applications and the medical use of cyclotrons are closely linked with MGH history.

The invention of the cyclotron by Professor Ernest O. Lawrence of the University of California was perhaps the leading single contribution to the field of nuclear accelerators. Together with M. Stanley Livingston, then a graduate student, he built and successfully operated a prototype cyclotron in 1930. A larger machine was immediately built, utilizing a magnet with a pole diameter of 11 inches, and protons of 1.22 million electron volts were obtained in 1931 from this machine.

In common with many other important inventions, the principle of the cyclotron seems so straightforward that it is surprising it was not previously considered. The fact that charged particles travel in circular orbits after entering a magnetic field had been known for sometime. It was also known that the time required for a particle to complete one orbit is independent of its energy and depends only on the ratio of charge to mass of the particle and on the magnetic field. It was also well known that a particle traveling through an appropriate voltage difference acquires energy in so doing. It remained for Lawrence to combine these well proven principles in such a way that particles could be continuously accelerated to very high energies in a machine of practical dimension.

The beam orbits within the cyclotron are inside two boxes shaped somewhat like the two halves of a pillbox that has been sliced through the center. The two boxes are appropriately called dees, and the voltage on these two dees can be varied by means of an external oscillator. Charged particles are injected into the center of the two dees and are accelerated by the electrical potential as they pass from one dee to the other. The particles then travel along a circular orbit until they again traverse the gap between the two dees. The frequency of the oscillator is such that the voltage across the gap separating the two dees is reversed and the particles are again accelerated.

This process repeats as the particles spiral outward, acquiring a certain amount of energy each time they traverse the gap. Therefore the maximum energy obtainable for a given particle is dictated by the size of the magnetic field or, roughly, the diameter of the magnet pole faces, and cyclotrons are often designated by this diameter. For example, the first full-scale cyclotron of Lawrence and Livingston was an 11 inch cyclotron.

In order to extract particles from the cyclotron, some mechanism must remove them from the final orbit. This is usually done by means of deflector plates. As the particles reach maximum radius, they enter a fine septum between two deflector plates and their path is sufficiently altered so that they emerge from the magnetic field. The accelerated particles can then be used to produce isotopes or neutrons or for direct irradiation.

After the successful demonstration of the cyclotron at Berkeley, a number of machines were built in the United States, including Harvard and MIT. The MIT machine, still in operation, is of considerable interest to us because of its close association with MGH projects. It was built under the supervision of Prof. Livingston, who came to MIT after obtaining his degree at Berkeley. He has been associated with a number of accelerator projects at MIT and is currently director of the Cambridge Electron Accelerator, jointly operated by Harvard and MIT. Prof. Livingston also provided valuable advice in the selection of the MGH cyclotron.

MGH Med. Photography Unit

This P&H tower crane began work on the construction of the Surgical and Special Services Building last November. It weighs 110 tons, and can lift a load weighing up to 7 tons. With the boom fully extended, its height is 265 feet.

It is interesting that the MIT cyclotron was supported by the John and Mary Markle Foundation, which is medically oriented, and medical applications for this machine were contemplated from the earliest planning.

Continued on Page 4

Larry Cook, Med. Photography Unit

Dr. John H. Knowles, General Director, wields the bricklayer's trowel at the cornerstone ceremony for the Surgical and Special Services Building. Looking on with jovial approval are Joseph W. Degen, Assistant Director (far left), and John E. Lawrence, Chairman of the Board.

Another Cornerstone Is Laid

Phillips Ketchum, Honorary President

The cornerstone of the 13-story Surgical and Special Services Building at the MGH was laid with appropriate ceremony on the morning of January 13, 1967. The foundation had already been completed, and the steel frame on that date extended up through the 6th floor level. This will be the largest and costliest hospital building erected to date in New England. It was designed by the architectural firm of Rogers, Butler and Burgun.

Thirteen operating rooms will be completed in 1968, and 8 more will be added later. These 21 rooms will all be on the 3d floor level, contiguous with the 12 operating rooms in the White Memorial Building. Thus MGH will have an integrated surgical operating suite of 33 rooms. The old operating rooms in the Baker Memorial and the Phillips House will be closed.

Although the upper 9 floors of the main wing (extending north from the White Building) will not be completed at this time, erecting the shell and installing the elevator system to full height now will result in a subsequent saving of about $500,000. The entire east wing (extending along Blossom Street) will be completed to provide space for many urgently needed research facilities.

The cost of this first phase of construction will approximate $21.5 million. More than $13.5 million has been raised to date, including $2.6 million from the U. S. Public Health Service. The Board of Trustees aims to raise the balance by the end of 1968.

John E. Lawrence, Chairman

The NEWS of MGH

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Subscriber Contributions

The Editorial Board of *The NEWS of MGH* reports that during 1966 a total of $3,026 was received from 708 subscribers, of which sum about $900 consisted of contributions beyond the $3 subscription rate. Five contributions ranged between $20 and $30 each, and ten between $10 and $20 each. Thirty-three contributions were for $7 each. Most of the remaining contributions were for $5 each — all beyond the regular fee.

Once again the Board extends sincere thanks to the subscribers for their generous support, and to those members of the Staff who have contributed articles and photographs for publication in *The NEWS.*

Hartford Grant for Aldosterone Study

A 3-year study of the metabolism of aldosterone is being supported at MGH by a $267,552 grant from the JOHN A. HARTFORD FOUNDATION of New York. This is an offshoot of a previous 3-year investigation of mechanisms of fluid and electrolyte transport supported by a $254,000 grant from the same foundation.

This program is directed by Dr. Alexander Leaf, Chief of Medical Services, MGH, and James Jackson Professor of Clinical Medicine, HMS, with the close collaboration of Geoffrey W. G. Sharp, Ph.D., Research Fellow in Medicine, MGH, and Associate in Pharmacology, HMS.

Aldosterone is a potent adrenocortical hormone with an important but inadequately understood role in the regulation of electrolyte metabolism. About 3 million Americans have hypertensive disease because of hypersecretion of aldosterone. Others with Addison's disease lack this hormone.

Dr. Pittman Honored

Smith College has granted an honorary degree of Doctor of Science to one of its alumnae, Dr. Helen S. Pittman of MGH. The citation reads:

"Your career triumphantly demonstrates the precise conjunction of heart and head which make up the great physician. Smith College can pride itself on giving breadth to your general understanding of humanity, while Johns Hopkins gave depth to your professional competence to handle humanity's ills. But throughout almost forty years of service it has been your own sturdy heart, level head, and frank tongue that have spelled courage to your patients, and your shrewd judgment that has been a source of inspiration to your physicians at Harvard Medical School and Massachusetts General Hospital. Smith College is grateful for your work as Counselor and friend to its Health Services and delighted that an alumna has so fully vindicated Sophia Smith's hopes for her College."

Dr. Pittman was Chief of the MGH Pulmonary Clinic from 1942, when she succeeded Dr. Donald S. King, to 1959, when she in turn was succeeded by Dr. John H. Knowles. Her 17-year term saw the advent of the antibiotics, which enabled pulmonary medicine to progress from the previously heavy reliance on surgical support to the present emphasis on medical control through the evergrowing knowledge of pulmonary physiology.

Dr. Pittman is now a member of the MGH Board of Consultation.

MGH Tops List

A panel of ten experts selected by *Ladies' Home Journal* have submitted answers to the following questions: "If you or your family required major hospital services — diagnosis or treatment — which 25 hospitals in the United States would you select as representative of the best? Which hospitals would you put in the top ten?"

The tally of the panel's votes showed MGH placing first on the list of best American hospitals. In general, the panelists picked large teaching hospitals; and of the 7,123 general hospitals in the country, only 175 received votes. The names of the panelists, together with some of their comments, were reported by Roul Tunley in the February issue of *Ladies' Home Journal.*

David Weisberger, DMD, MD (1903 — 1966)

Dr. David Weisberger, Chief of the MGH Dental Service and Professor of Dental Medicine in the Harvard School of Dental Medicine, died last November 8 at the age of 63 after a brief illness.

Dr. Weisberger came into notice early in his career at Harvard when he discovered the relation between rampant tooth decay and reduced salivary gland secretion in animals. Later he elucidated the role of altered glycogen metabolism in leukoplakia and found a correlation between liver cirrhosis and oral cancer. More recently, he had been investigating the antigenic process in the rejection of tooth transplants.

At MGH his first concern was to develop the Dental Clinic into a full service. In 1948, shortly after becoming Chief, he wrote: "In a small service such as we have, a limited point of view becomes a threat in the training of house officers. We hope to correct this by utilizing for house service some of our well-trained visiting staff whose activities for some time have been limited to the Clinic, only." (*The NEWS of MGH,* Aug. 1948)

Two years later he reported that "the clinic is organized with a large visiting staff skilled in caring for the surgical conditions arising in the ambulant patient. . . . When one evaluates the care received by the patient, together with the training made available to the interns, it would appear that the development of this service is justified." (*The NEWS of MGH,* Oct. 1950)

In 1952 he was able to state that most of the laboratory studies underway at the Harvard School of Dental Medicine were based on observations made at the MGH.

Dr. Weisberger was a Diplomate of the American Board of Oral Medicine and a Fellow of the American Academy of Dental Sciences. In 1957 he was awarded an honorary degree by the American Academy of Dental Medicine.

Dr. Walter Guralnick is now acting Chief of the MGH Dental Service.

Service League

The annual luncheon of the Service League is being held on March 2 at the Charterhouse on the Charles River, opposite the MGH. The principal speaker is Dr. Kenneth Bird, his subject being the facility of which he is director — the MGH Medical Station at the Logan International Airport.

The Reception Center on Moseley I reports that during the past year 100 more tickets to concerts, etc. were distributed to MGH staff members from overseas than during the previous year. These tickets are generously donated by holders who find that for one reason or another they cannot use them.

Cyclotron . . .

Continued from Page 1

In more than 30 years of operation the MIT cyclotron, under the direction of Prof. Robley Evans, has proved its worth many times over, both in the physical sciences and in medicine and biology.

In the fall of 1936. Dr. Karl Compton, then president of MIT, addressed a Harvard Medical School colloquium on the subject, "What Physics Can Do for Biology and Medicine." During the talk he mentioned the possibility of producing radioisotopes from stable chemical substances. This created a good deal of excitement among those present, and after the discussion Dr. Compton was asked by Dr. J. Howard Means, then head of the Thyroid Clinic and Chief of the Medical Services at MGH, whether it was possible to produce a radioactive form of iodine. Dr. Compton replied that he would attempt to find the answer, and very soon communicated to Dr. Means that Fermi in Italy had produced a form of radioactive iodine. This discussion led to a cooperative study on the subject by MGH and MIT, culminating in a long and profitable series of studies with radioactive iodine in the Thyroid Clinic.

In 1941 a patient with hyperthyroidism was treated with radioactive iodine by Drs. Hertz and Roberts at the MGH. This may have been the first therapeutic application of an artificially produced radioisotope, although similar studies were beginning at Berkeley under the direction of Drs. Hamilton and John Lawrence, the brother of the inventor of the cyclotron. Between 1941 and 1943, 29 patients were treated with radioactive iodine at MGH by Hertz and Roberts, and in 1946 Drs. Chapman and Evans concluded that radioactive iodine is effective in the treatment of hyperthyroidism. Since that time, of course, the use of iodine 131 has become so widespread that hundreds of medical centers now administer diagnostic and therapeutic doses of this isotope.

It is interesting to note that the advent of nuclear reactors after the second World War provided a simpler and easier method of producing radioiodine, and from that time virtually all iodine 131 has been produced in reactors. This has been a common fate of many cyclotron-produced isotopes. For many reasons, including government support and ease of operation, the reactor has proved to be a more convenient source of many isotopes than the cyclotron. However, the fact remains that nearly half of the isotopes with usable half-lives and radiations can be made only in a cyclotron. Consequently, after a long period of relative inactivity, interest is shifting back to the cyclotron.

The possibility of direct use of radiation from a cyclotron was also considered at a very early date. Dr. Robert Stone at Berkeley considered the application of fast neutrons in therapy. The cyclotron was — and still is — a copious source of fast neutrons. It also has the advantage, in comparison with a reactor, of producing fast neutrons relatively free from gamma ray contamination. For various reasons, however, the studies carried on by Dr. Stone on fast neutron therapy were unsuccessful. Perhaps the most important factor was lack of adequate instrumentation for the precise measurement of radiation dose in the irradiated patients. In any case, the results of Stone have discouraged investigators from using fast neutrons. However, interest in the application of fast neutrons in radiation therapy has recently been revived at several centers, and this may be one area which will be explored with the MGH cyclotron.

The history of cyclotrons and the succeeding generations of synchrotrons, synchrocyclotrons, bevatrons, etc., has been one of a spiraling rise in size, energy, and cost. Although the basic interest in these high energy machines is not biological, many of them have found biological application. This is particularly true of the 184-inch cyclotron at Berkeley, which has been used for direct proton beam irradiation of patients, utilizing protons of sufficient energy to penetrate large distances in tissue. The possibility of using mesons for radiation therapy has also been explored. Similarly, the large cyclotron at Harvard and the cyclotron at Oslo, Norway, have been used for proton beam irradiation.

The work at Harvard carried on by Drs. Kjellberg and Sweet of the MGH Neurosurgical Service has had as its principal aim the use of a proton beam to destroy small regions in the brain. This technique has been used in the treatment of Parkinson's disease and for various forms of pain relief, as well as to destroy the pituitary gland without surgical intervention.

From a medical point of view, one of the most interesting cyclotrons is the 45-inch cyclotron installed by the Medical Research Council at Hammersmith Hospital in London, specifically for medical use. Although this cyclotron has had a variety of medical applications, perhaps the principal development at Hammersmith has been the use of the three short-lived isotopes, oxygen 15, nitrogen 13, and carbon 11. These have half-lives of from 2 to 20 minutes, and each decays with the emission of a positron. The annihilation of the positron gives rise to high energy photons which can be detected externally. These isotopes have proved to be of great value in the study of pulmonary physiology; and in particular, oxygen 15 — in the form of CO_2 or CO or O_2 — has found wide use. Dr. John West of Hammersmith Hospital has been one of the leaders in exploiting the possibilities of oxygen 15, although Dr. Ter-Pogossian of Washington University had employed these isotopes some years earlier.

The use of such short-lived isotopes requires a completely new technology. Most isotopes are produced in a reactor or cyclotron, processed in a rather conventional radiochemical laboratory, and stored until desired in an experiment. Short-lived radioisotopes such as oxygen 15 must be produced immediately before use, and the processing must be carried out on a time scale commensurate with the half-life of the isotope. Obviously the physiological phenomena must occur on a similar time scale. Many processes in pulmonary physiology, such as oxygen absorption from the lungs and the determination of perfusion and ventilation of the lungs, satisfy this criterion. Although these gases have not yet been used in pulmonary studies at MGH, Drs. Kazemi and Streider of the Pulmonary Function Laboratory and Dr. Aronow and others of the MGH Physics Research Laboratory have begun studies with xenon 133 and have worked out many problems of detection and recording which will arise in the use of oxygen 15.

Alternatively, short-lived isotopes may be used to tag blood components in measuring blood flow in organs other than the lungs. For example, brain blood flow can be measured by use of tagged red cells after inhalation of small amounts of carbon monoxide labeled with carbon 11 or oxygen 15. Indeed, blood flow in any portion of the body can be measured by means of similar techniques.

The advantage of short-lived isotopes in all of these applications, other than the fact that there are no long-lived isotopes of nitrogen and oxygen, lies in the very small radiation dose received by the patient during such measurements. Because the half-lives used are comparable to the duration of the phenomena being observed, the radiation dose is usually a very small fraction of that which would be received in using conventional, longer-lived isotopes.

To a certain degree the MGH cyclotron is related more to the original cyclotron of Lawrence than to the mammoth new machines currently being planned and built, such as the proposed 200-bev accelerator. However, the MGH cyclotron has been designed specifically for the tasks it will perform. It has an advantage in being the second built by the Allis-Chalmers Company. The first Allis-Chalmers unit was installed at Washington University in St. Louis and is currently being used for production of oxygen 15 and carbon 11. The

MGH Med. Photography Unit

Site of the future Shriners Burns Institute on Blossom Street, as it looked on October 10. The steel frame is now rising rapidly.

principal aim in the design of the MGH cyclotron is the routine production of the three short-lived isotopes, oxygen 15, nitrogen 13, and carbon 11. This can be accomplished with deuterons of relatively low energy. A second requirement is the capability of producing large numbers of fast neutrons, and these can also be produced with moderately high currents of low-energy deuterons. Finally, it is desired to use this cyclotron in a limited way for activation analysis and for the direct irradiation of biological media. For this purpose provision has been made for the acceleration of helium-3 ions. Based on these requirements, the second Allis-Chalmers machine has been designed as a 33-inch cyclotron which will accelerate 6-mev helium-3 ions. The design emphasizes simplicity and reliability, which hopefully will lead to a machine that can be operated in a routine manner.

Although the MGH cyclotron is considered a small machine, some of its dimensions would appear otherwise. For example, the weight of the steel in the magnet is 25 tons. The magnet will require 40 kilowatts of d.c. power to produce a magnetic field capable of holding the particles within the cyclotron; and overall, the cyclotron and its ancillary equipment will require 150 kilowatts of power. To dissipate the heat generated in the magnet, 60 gallons of cooling water per minute are required.

A great deal of attention has been given to the problem of safe operation of the MGH cyclotron. The design of shielding for the cyclotron room is extremely conservative. The basic shielding consists of 4 feet of concrete above the machine and 3 feet of concrete in the walls as well as the earth fill. The basic consideration is that the dose rate at the outer surface will be within tolerance under the most stringent operating conditions. These conditions would exist when the full deuteron beam current is incident on a beryllium target to produce neutrons. It is very unlikely that levels of radiation even approaching this magnitude would ever actually be produced, at least without supplementary shielding. During normal operation of the cyclotron to produce short-lived isotopes, the radiation level will be relatively low.

Three Victoreen area monitors will continually record radiation levels at various locations in the cyclotron vault, the shielded chemical processing room, and one other area. In addition, an air monitor will sample radioactivity in the air at various locations in the cyclotron laboratory and in the various laboratories where the radioactivity will be used. Facilities have been provided for using the short-lived isotopes in any of the laboratories immediately adjacent to the cyclotron, as well as the new Shriners Burns Institute, should that be desired in the future.

The ancillary equipment is as important as the cyclotron itself for effecting successful use of short-lived isotopes. A gas-handling system has been designed and is in the process of construction. It will automatically process gas in the chemical form desired, and will monitor the gas and send it to the desired location. In addition, a beam transport system is being designed to focus the beam at a remote location for direct irradiation of targets or specimens in the cyclotron room and for the production of neutrons.

The cyclotron is to be located in and be part of the Pulmonary Unit, which includes the pulmonary research conducted with cyclotron-produced isotopes by Drs. Kazemi and Streider. The operation of the cyclotron will be the responsibility of the Physics Research Laboratory. The principal task of the cyclotron staff will be to provide short-lived isotopes for clinical investigators in pulmonary physiology. However, it is hoped that short-lived isotopes will find application in a number of other areas, such as cerebral, renal, and other blood flow studies.

The possibilities of the MGH cyclotron are exciting. The many anticipated applications for short-lived isotopes, coupled with the considerable interest in positron detection and positron scanning at MGH, create an ideal atmosphere for exploiting their potentials. Such being the case, it is hoped that the MGH will again take the lead in exploring a new frontier of medical science.

GORDON BROWNELL, PH.D.
Director of the
Physics Research Laboratory
MGH

G. W. Taylor, MD

(1897 — 1966)

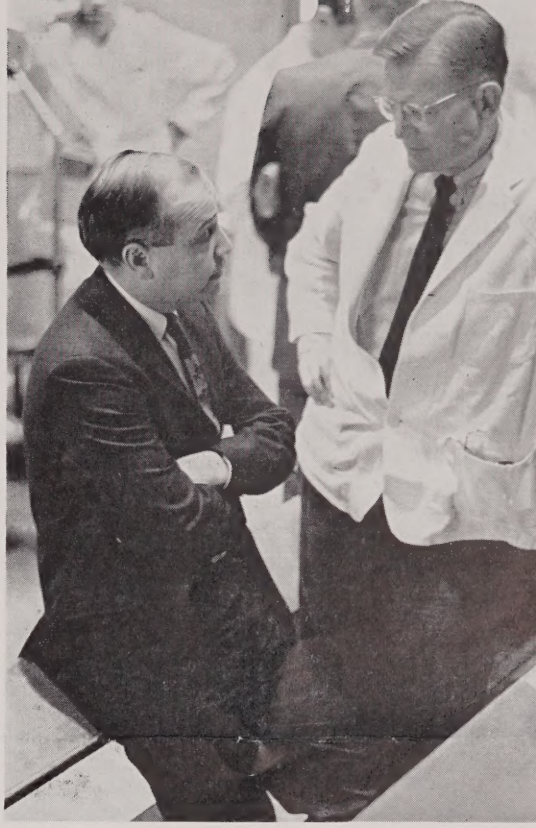
Dr. Grantley W. Taylor, a member of the MGH Board of Consultation and formerly Associate Clinical Professor of Surgery at the Harvard Medical School, died last December 26 at the age of 69 while vacationing on St. Vincent's Island in the West Indies.

Dr. Taylor was graduated from Harvard College in 1918 and from HMS in 1922. He was an intern and resident at MGH until 1925, when he was appointed to the Active Staff. It was in 1925 that the MGH Tumor Clinic was established — the first consultative and follow-up cancer clinic in any general hospital — and Dr. Taylor was associated with it throughout his career. He was chairman of the Tumor Clinic Committee from 1946 until his statutory retirement in 1957.

Dr. Taylor and Dr. Ira T. Nathanson published a well known book entitled *Lymph Node Metastases* (Oxford University Press, 1942). In reviewing this work Dr. Ernest M. Daland, then head of the MGH Tumor Clinic, wrote, "The reviewer insists that this is one of the most important cancer books published in a decade."

During World War II, Lt. Col. Taylor was awarded the Bronze Star Medal for meritorious service as Chief of Surgery with the 95th Evacuation Hospital in Italy and France. Earlier he had been Assistant Chief of Staff with the 6th General Hospital.

In 1960 Dr. Taylor received an award from the Massachusetts Division of the American Cancer Society "in recognition of his outstanding contribution to the control of cancer." He was elected to fellowships in the American College of Surgeons and the International Society of Surgery. He was president of the New England Surgical Society, New England Cancer Society, and Boston Surgical Society.



B. F. Herzog

Dr. Austen (left) and Dr. Russell

Dr. Austen Promoted

Dr. W. Gerald Austen, Chief of the MGH Surgical Cardiovascular Research Unit since 1963, has been appointed a full professor of surgery at the Harvard Medical School at the age of 36. In the above photograph he is seen with Dr. Paul S. Russell, Homans Professor of Surgery, and Chief of the MGH Surgical Services.

Dr. Austen's development as a cardiac surgeon was accelerated by the engineering knowledge he acquired at MIT, from which he was graduated in 1951. He was graduated from HMS in 1955. While an intern at the MGH, he and Dr. Robert S. Shaw built the first heart-lung machine to be used in this hospital. Dr. Austen also devised a mechanical model of valvular function and worked out a procedure for exposing the obstructed aortic valve during surgery. The first successful application of this procedure was done at the MGH by Dr. J. Gordon Scannell in 1957.

Currently Dr. Austen is conducting a series of investigations on the problem of myocardial revascularization and is also interested in the problem of hypertension in the pulmonary vascular circuit. He is collaborating with the Department of Chemical Engineering at MIT in a study of materials that may be compatible with the human organism.

Dr. Austen received a 5-year Markle Scholarship in 1963. Despite his heavy research and teaching schedule, he finds time to perform a number of open-heart operations each week.

John J. Fields
Staircase in Bulfinch Building

Treadwell Library

The following books, all published in 1966, were written by MGH authors or are otherwise of special interest to MGH readers:

Carl Binger, MD. *Revolutionary Doctor: Benjamin Rush,* 1746-1813. New York; Norton.

Abigail Adams Homans. *Education by Uncles.* Boston; Houghton Mifflin.

David McCord, ed. *Bibliotheca Medica: Physician for Tomorrow.* Dedication of The Countway Library of Medicine. Harvard University Press.

Richard L. Sidman, MD, and Murray Sidman, PhD. *Neuroanatomy.* Boston; Little, Brown.

Edward Weeks. *The Lowells and Their Institute.* Boston; Little Brown.

Claude E. Welch, MD. *Surgery of the Stomach and Duodenum.* 4th ed. Chicago; Year Book Medical Publishers.

A new history of the Harvard Medical School, written by Dr. Sidney Burwell, Dean Emeritus of HMS and an MGH alumnus (1921), will soon be released by the Harvard University Press. This is a work of the greatest magnitude.

MGH Briefs

Dr. Henry R. Viets, MGH Honorary Physician and Curator of the Boston Medical Library, has been elected an honorary member of the William Osler Club of London.

Dr. Robert S. Schwab, Director of the Brain Wave Laboratory, will be given a dinner on March 18 at the Sheraton Boston Hotel by the American Parkinson Disease Association.

Dr. Kurt J. Isselbacher, Chief of the Gastrointestinal Unit, has been elected to the presidency of the American Association for the Study of Liver Diseases (1966-67). In addition, he was recently invited by the American Swiss Foundation for Scientific Exchange to be visiting university professor and to lecture at the five medical schools in Switzerland.

Dr. H. Thomas Ballantine, Jr., Visiting Neurosurgeon, lectured on "Medicine and Chiropractic" in Chicago last October at the Third National Congress on Medical Quackery, which was sponsored by the American Medical Association and the National Health Council.

Dr. Stanley P. Bohrer, a member of the MGH Department of Radiology until last December 31, has rejoined the staff of the University College Hospital in Ibadan, Nigeria, where he had previously served 16 months as visiting lecturer in radiology.

Dr. Michael E. DeBakey, Professor and Chairman of the Department of Surgery at the Baylor University College of Medicine, delivered the Edward P. Richardson Lecture at MGH in the Bigelow Amphitheater last January 17, his subject being "Clinical Patterns of Cerebrovascular Insufficiency and Their Surgical Implications."

Mrs. Edith Tagrin, Director of the Medical Art Unit, received an Outstanding Service Award at the annual meeting of the Association of Medical Illustrators, which was held last October in Atlanta.

The new corridor connecting the Baker, the White, and the SSS Building on the ground floor level, has been opened to traffic — much to our relief.

The McLean Newsletter has made its initial appearance in a new format. This attractive paper is edited and produced at the McLean Hospital by the Public Relations Office, of which Mrs. Barbara R. Hopkins is the director.

Sixth General Hospital

A reunion of all officers of the Sixth General Hospital, the MGH unit in World War II, will be held at the White Cliffs Motel in Plymouth, Mass. on the weekend of May 6 and 7 in celebration of the 25th anniversary of its activation in 1942.

Mrs. John B. McKittrick is the general chairman for the reunion, and is being assisted by a cadre consisting of Drs. Daniel Holland, Alfred Kranes and Howard Ulfelder.

Five hundred new Wedgwood Queensware service plates, designed originally for the 150th anniversary of MGH, are again available at $4.25 each through the General Store and Gift Shop conducted by the Ladies Visiting Committee. The design of this 10½ inch plate shows a view of the original Bulfinch Building and wharf, enclosed within a clover border—all in MGH blue.

A Letter from Conakry

Monsier Scannell, Très cher Docteur:

J'ai le plus grand plaisir de vous écrire cette lettre pour vous renouveler mon indéfectible attachment à vous même personnelement, ainsi que tous ceux à vos côtés ont contribué aux succès de mon opération. . . . Oui vous m'avez fait réagir dans une vie nouvelle, un monde non veau; vous m'avez donnée en somme un avantage radieux. Grâce à vous et à votre ami et frère Docteur Hiebert j'étais devenu en Amerique un africain au milieu des siens. L'Amerique était devenue pour moi l'Afrique ma mère patrie . . . L'amour tendre à mon égard se manifestait dans toute les occasions, je ne pourrais jamais oublier l'Hôpital Massachusetts Général, le 7 floor, ses douces et souriantes infirmières qui aiment leurs patients, leurs malades, leurs hôtes. Je vous prie de dire à tour vos amis et collégues que leurs passions de l'âme à marquer grandement ma vie. Mon salut des meilleurs à tous ces Docteurs MacNamara, Cooper et Scannell et tant d'autres que je ne puis citer. . . .

Très sincèrement votre ami de tous les temps.

TRAORÉ KABINÉ

Dr. J. Gordon Scannell says that the writer of the above letter is a young schoolteacher in the Republic of Guinea who was seen in cardiac clinic by Dr. Clement Hiebert during the latter's tour of duty aboard the S.S. HOPE. *Mr. Kabiné was subsequently admitted to MGH for replacement of the aortic valve, and now is back home and teaching in Conakry.*

The Coordinated Program in Retrospect

A very interesting 20-year experiment in nursing education terminated at the MGH in September 1966. Fifty young women, graduates of Radcliffe, Wellesley, Mount Holyoke and other eastern liberal-arts colleges, had completed what was known as the Coordinated Program. Why was it devised? Why did it end?

The MGH School of Nursing had long been entitled to its reputation as an outstanding hospital-conducted school when in 1946 the first students entered the Coordinated Program. For more than 25 years there had been a growing recognition in the United States that more than the traditional program of nursing education was needed if nurses were to be prepared well for the increasing responsibilities imposed by advances in medical science and the enlarging scope of opportunities in nursing. Leadership positions were beginning to require that nurses have a sound education on which to base advanced preparation.

Some college graduates had entered the MGH School of Nursing in nearly every class for many years. These women have made special contributions to nursing. Similarly, the graduates of the Vassar Training Camp in World War I and the Yale University School of Nursing have demonstrated convincingly that the additional maturity, the well disciplined minds, and the breadth and depth of education of college graduates were not only valuable but increasingly essential to the appropriate growth of nursing. Many leaders had come to believe in a curriculum which combines liberal arts and nursing education. In Boston by 1946 there were three such programs, which granted after four or five years the degree of bachelor of science in nursing, or bachelor of science in the case of the longer program.

At MGH, Miss Sally Johnson, Director of the School and Nursing Service; her assistant, Miss Ruth Sleeper; and members of the faculty wanted the School to play its proper part in preparing soundly educated women for positions in nursing. The road to the realization of this goal was tortuous and difficult. The institutions most likely to be interested in nursing education already had their own degree-granting programs. The colleges of liberal arts in the greater Boston community were eliminating all traces of vocational education in the undergraduate years. Finally, a plan was devised with Radcliffe College, which had been our first and natural choice because of the interrelationships between the MGH and the Harvard Medical School.

This plan was unique in the way its design permitted young women to combine a full liberal arts education with preparation for nursing. During the four years at college, each student majored in whatever was the field of her choice. In addition, pre-professional courses were studied at both the college and the School of Nursing so that the preclinical requirements were completed by the time the student was granted the bachelor of arts degree. During the undergraduate years, two summer terms of 8 weeks each were utilized for the study of two sciences basic to nursing, together with the introduction to nursing.

The clinical period of one year and ten months began in late June. It included Medical and Surgical Nursing and the Surgical Specialties, Obstetrical Nursing, Pediatric Nursing, Psychiatric Nursing, and Public Health Nursing. These courses and the associated nursing experiences were obtained at the following hospitals: MGH, Boston Lying-in, Children's Hospital, and McLean. Field experience in Public Health Nursing was obtained through the cooperation of the Visiting Nurse Association of Boston and the Health Department of the City of Boston. That the students had superior facilities for learning experiences in college and health agencies has always been acknowledged.

Sylvia Perkins, RN

The diploma of the Coordinated Program of Radcliffe College and the MGH School of Nursing was granted after the successful completion of all of these experiences. The diploma was signed by the President of Radcliffe College, the Chairman of the MGH Board of Trustees, the Director of the MGH, and the Director of the MGH School of Nursing.

The nursing curriculum was approved by the Massachusetts Board of Registration in Nursing. The faculty of the Program, separate and distinct from that of the diploma school after the earliest years, obtained approval of many changes and innovations in keeping with the trends in college programs for nursing and in line with the aims and needs of this particular curriculum. All schools of nursing in every one of the United States must be approved by a state board of registration which sets standards for faculty, curriculum, and the like.

Even in the initial planning stage when consultation was given by the National League for Nursing Education to the Program committee, composed of executive representatives of the College and the Hospital, it was realized that accreditation of the Program by the League was impossible. One of the basic tenets of that organization holds that to be eligible for accreditation, a college or university must assume the same responsibility for its school of nursing that it does for all other schools. Moreover, all faculty are to be appointed by the college, and to be eligible for the same duties and responsibilities as their associates. Neither of these conditions was ever met in the Coordinated Program.

Failure of a program to meet accrediting standards for any period of time interferes with recruitment of students and new faculty. It cuts the faculty off from participation with their peers in the appropriate department of the League. In addition, the faculty of the Program were largely unknown at the College. At MGH, differences in philosophy and in opportunities to conduct a completely educational program tended to separate the faculties of the diploma school and the Coordinated Program.

Why were these undesirable conditions essentially written into the Program? This was to be an experiment. Great hopes were held by those on the eastern shore of the Charles River that development might occur which would reduce any initial disadvantages and limitations.

How did students learn about the Coordinated Program? Initially, some brochures were devised cooperatively and published by Radcliffe. All the students were approved for admission by Radcliffe and if applicants wished also to enter the nursing program a joint committee from the College and the Nursing School gave its approval. There were impediments to recruitment. The Program did not appear on the list of schools accredited by the National League for Nursing

Continued on Page 8

Program . . .

Continued from Page 7

and sent to guidance counselors in high schools. Radcliffe was not associated with a nursing program in the minds of applicants, alumnae, or school counselors. A certain reticence about the Program appeared to occur when some college representatives were making recruitment visits to schools. On its side, the MGH School of Nursing was restricted by the existing system of recruitment in Massachusetts to speaking of nursing in general terms, while the colleges which conducted schools of nursing were free to recruit under their college plan. The availability of some scholarships offered by both institutions brought the Program to the attention of some applicants.

The arrangement of the preclinical courses made it obligatory for a student to enter the Program not later than her sophomore year. Most students who entered Radcliffe with the intent to study nursing had romantic and hazy ideas of nurses, their education, and the opportunities open to them. Public health nursing was almost unknown, for example. The variety and challenge of courses offered by Radcliffe had not been fully grasped. Some students, however, were well informed and highly motivated. They interpreted their interest in nursing and the Program to members of the college administration and to other undergraduates. They risked ridicule and scorn by so doing, but they recruited a number of girls for the Program who would never have heard of it otherwise.

Twenty-three of the 28 Radcliffe students who completed the Program entered under the original plan as freshmen or sophomores. The other five girls entered the revised Program after 1959. Some were undergraduates at Radcliffe when their decision was made; others had already graduated.

The picture of enrollments and withdrawals in the first 13 years includes one highly significant fact: once embarked in the clinical period of the course, no student ever withdrew. There were many reasons for the earlier shift of interest from nursing to other fields. While their validity was recognized, there were built-in dilemmas that prevented correction, if, indeed, there had been sufficient motivation in some to complete a program nearly six years long. Some students left college and the Program; others stayed in college but dropped nursing. One student, who withdrew during college because academic and social pressures were more than she could handle, entered the revised Program after graduation from Radcliffe and was most successful.

In 1956 the MGH and Radcliffe acted upon the recognized need to have the Program studied. Mr. Everett C. Hughes, a sociologist well known for his studies of professional occupations, was invited to direct this study, which was financed by MGH, Radcliffe, and the Rockefeller Foundation. Mr. Hughes knew the significant literature concerning the needs for development and change in nursing education. *Nursing and Nursing Education in the United States* (1923), the report of a valuable study financed by the Rockefeller Foundation; E. L. Brown's *Nursing for the Future* (1948); and Margaret Bridgman's *Collegiate Education for Nursing* (1953) all stressed the need for changes in nursing education.

Miss Brown, an anthropologist who had scrutinized other professions before examining nursing, recommended that all programs preparing for nursing should be developed within and made part of the higher education system in the United States and should be organized, administered and controlled under the same kinds of auspices and supported from the same sources that are now provided for other occupations. The Hughes Study includes an interesting discussion of the problems inherent in fulfilling this recommendation.

Six graduates of 1966 MGH Course for Directors of Hospital Volunteers receive certificates from Dr. Ellsworth T. Neumann, Administrator of MGH. Left to right: David L. Ramsay, Calgary General Hospital, Calgary, Canada; Mrs. Joyce P. Carroll, RN, Laconia Hospital, Laconia, N. H.; Mrs. Jean Bawden, Carson Tahoe Hospital, Carson City, Nev.; Dr. Neumann; Mary Ruth Wolf, Director of Volunteers and founder of the course, MGH; Mrs. Gudrun B. Howe, Faulkner Hospital, Boston, Mass.; Mrs. Elizabeth A. Houlihan, Mass. Eye and Ear Infirmary; and Mrs. Phyllis R. Hollinshead, Winchester Hospital, Winchester, Mass.

The findings and conclusions of Mr. Hughes and his group strictly pertinent to the Coordinated Program cast light on issues that had been suspected by the parties to the agreement and by the students, though not simultaneously or clearly. In brief, on the basis of obvious need in nursing for such a program, the recommendation was made to eliminate some of the problems identified above by revising the plan so that graduates of additional liberal arts colleges could be recruited, the length of the curriculum be shortened, and the caliber of instruction be made more appropriate for college graduates.

Even while the Hughes Study was in process, changes were being made in the Program. The faculty were continually challenged by the intellectual ability of the students, by their reactions to antiquated educational practices characteristic of traditional nursing schools, and by their needs to have their interest in nursing fortified during the four college years. Another influence was derived from the temporary association of the Simmons College School of Nursing with the Coordinated Program. This was a period of development and change for many nursing programs.

For decades, students enrolled in the nursing course at Simmons were melded with diploma students in various hospital programs after the first two years at college. A few years after the Coordinated Program was initiated, and the number of students having remained small, it was considered appropriate to have the Simmons faculty consider the feasibility of entering into cooperative arrangements whereby their students would join those in the Coordinated Program so that the different program might be available to them. Each institution supplied some instructors for nursing courses taught at the MGH, while Simmons provided instruction in Psychiatric Nursing at the McLean Hospital, and instructors from both programs cooperated in the teaching of Public Health Nursing.

Strong bonds of mutual regard developed between the two faculties; both profited from the association. The stresses and strains of so much necessary adaptation in the curriculum and some differences between the two groups of students produced some undesirable results. However, for a while the larger classes, the economies, and the partial identification of Coordinated Program faculty with some college program offset the disadvantages. In the natural evolution of the nursing school at Simmons College, complete separation from the Coordinated Program took place. Instruction in Psychiatric Nursing was purchased by the MGH from Simmons until it became possible to appoint an instructor for the students in the Coordinated Program.

The appointment of faculty for every nursing course in the Program was realized by 1961. However, finding teachers for the preclinical sciences presented another type of difficulty throughout the years. By policy, Harvard faculty may not teach elsewhere; therefore it was necessary to seek other teachers for Microbiology, Organic Chemistry and Biochemistry, Anatomy and Physiology. Fortunately, an excellently prepared teacher of Chemistry was on the faculty of the MGH School of Nursing. It must be admitted that the courses enumerated here are taught within Harvard at the Medical School and that in addition to formidable prerequisites, the selection of content in both depth and scope which is appropriate for a medical student is not identical with the needs of even the college-educated student of nursing. In many instances men or women who were Fellows at Harvard were employed in the Program and taught exceptionally fine courses. For other courses, teachers of full professorial rank were available from other institutions. However, no matter how excellent the courses, if faculty had no time to become well acquainted with the aims and content of the whole curriculum, constructive planning was out of the question. It was rare to have the same instructor for more than three terms. Their contribution to the learning and morale of the students was inestimable nonetheless.

It can be seen that the problems of the years from 1946 to 1959 had to do with recruitment of students and appointment of faculty; with dissatisfaction and impaired student morale; with complications and discontinuities among the nursing faculty, coping with their own pressures and blocks to progress; with failure to have appropriate relationships with the proper parent organization; and with the impossibility of meeting the criteria for accreditation by the National League for Nursing. It should be stated unequivocally here that the faculty of the Coordinated Program believed in and continue to support the League in its choice of criteria for accreditation of baccalaureate and higher degree programs.

Sylvia Perkins, RN
Asst. Director, School of Nursing
Chairman, Coordinated Program

(To be concluded in next issue)

MASSACHUSETTS GENERAL HOSPITAL 1811

The NEWS of MGH

Mass. General Hospital
School of Nursing
Palmer-Davis Library

Vol. 26, No. 2 Boston, Massachusetts March-April 1967

Capsule Irradiator Tried Clinically in Arteriovenous Shunt

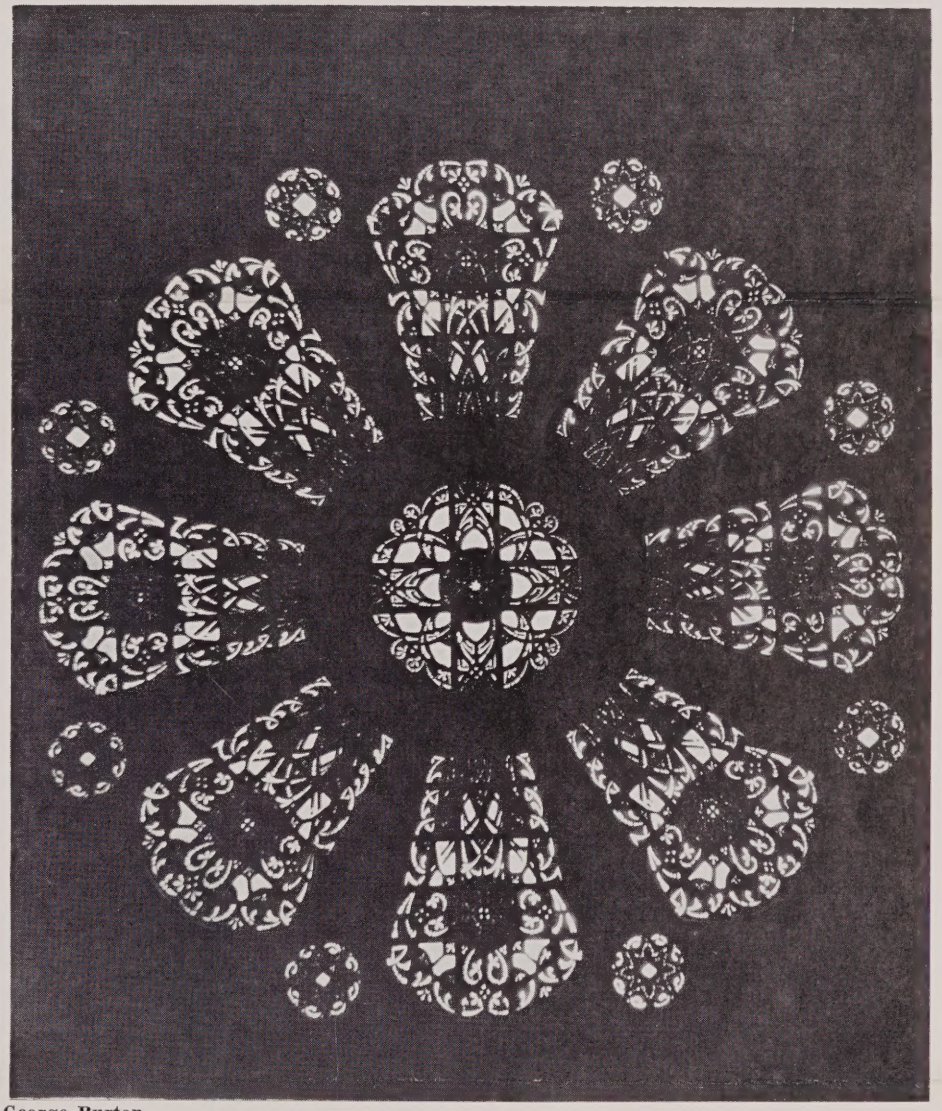
Irradiation for years has been a standard approach to the treatment of malignant disease, and the ability to direct the ionizing radiation to a specific tissue considerably enhances the effectiveness of this approach by sparing undiseased organs. One of the difficulties in controlling malignant tumors of the blood stream such as leukemia by radiation has been the impossibility of localizing the irradiation to the blood itself without irradiating other parts of the body. In the past, various forms of radiation therapy have been tried with the irradiation of bone marrow and spleen by means of x-rays and radioisotopes, but large adjacent areas were of necessity included in the field of radiation. This problem has been largely solved by the work of Dr. Cronkite at the Brookhaven National Laboratories, where for the past five years techniques of irradiating the blood circulated in an extracorporeal arteriovenous shunt have been explored.

This developmental work, done largely in experimental animals, has recently been applied to patients, with important practical and theoretical implications. One of the difficulties encountered in irradiating the blood in an extracorporeal shunt employing a powerful source of gamma rays is the ponderous and weighty lead shielding necessary to protect the patient from scattered lethal irradiation. Consequently, only intermittent periods of irradiation may be employed because the patient is temporarily immobilized next to a fixed and shielded source of gamma rays such as a Co-60 bomb.

This report presents the initial stages of the development of a portable source of radiation used in an arteriovenous shunt. Strontium 90 is placed in a radioapplicator which is cylindrical in shape and measures 20 mm in length and 3 mm in diameter. The applicator contains 300 microcuries of strontium 90 and is placed in a plastic capsule through which the blood circulates around the source of radiation. The walls of the capsule plus the layer of blood surrounding the radioapplicator are sufficient to absorb the radiant energy and avoid the hazards of total body irradiation while the circulating blood is receiving a substantial dose. The beta rays are potent with a maximum energy of 2.2 million electron volts, but their nonpenetrating nature results in the layer of blood absorbing virtually all the energy. The capsule and applicator together weigh about 2 ounces and cost less than $400, and the source can be used over and over again. Studies in a variety of animals are part of a concomitant program for investigating this technique experimentally while clinical trials are being cautiously evaluated.

This technique was used in a patient recently admitted to MGH with chronic lymphocytic leukemia and with a white cell count in the range of 40,000 cells per cubic millimeter. An arteriovenous shunt was constructed between vessels at the wrist, and a plastic capsule containing the applicator was placed in the circuit. The shunt for the first 15 days contained one source and for the next 15 days it contained two sources, doubling the dose of irradiation. The total blood volume received 275 or 550 rads

Continued on Page 2



George Burton

The Rose Window in the Chapel (story on page 8)

Capsule Irradiator...

Continued from Page 1

per day, and the lymphocyte count gradually diminished from 40,000 to less than 1,000 cells per cubic millimeter. Other elements of the blood, such as the red cells and polymorphonuclear leukocytes, did not change significantly, and there was no evidence of hemolysis, damage to the plasma proteins, or alterations in the clotting properties of the blood. Studies of the chromosomes seen in cultures of the lymphocytes, arrested in mitosis by the use of colchicine, revealed a number of abnormalities demonstrating a radiation effect in lymphocytes that otherwise appeared morphologically normal.

This study allows us to conclude that an elevated peripheral blood lymphocyte count may be reduced by means of continuous radiation from a small applicator that permits the patient to be ambulatory. The eventual role of this type of treatment in the therapy of malignant diseases involving the blood cells is currently under investigation.

The role of the lymphocyte is proving to be an extraordinary one, and research today has defined this role in a wide variety of normal and diseased states. Attention has been directed to the critical role of the lymphocyte in the immunological defense an individual mounts when exposed to foreign protein or foreign tissues. The lymphocyte is the courier and repository of immunological information. The lymphocyte wanders about the body spending various portions of its life in the blood stream, in the tissue spaces, or sequestered in the spleen, thymus, lymph nodes, and similar organs. The population of lymphocytes in the blood stream in an adult is about 10^{10} cells, and these cells are in some sort of steady state of exchange with the lymphocyte population in the rest of the body. Therefore, irradiation of the lymphocytes in the peripheral blood is followed by a striking reduction of the cell density in lymphoid organs such as the spleen, thymus, and lymph nodes. Consequently, we have an effective means of modifying the lymphocyte population in the entire body by irradiation of the peripheral blood. This in turn suggests new opportunities in the control of diseases with an immunological basis, such as autoimmune disease, as well as the control of neoplastic disorder of the blood.

Other investigators have considerably extended our information about the lymphocyte, and the work of Gowans in Oxford, England, as well as that of Cronkite at the Brookhaven National Laboratory, should be mentioned as presenting new knowledge in regard to the life cycle of the lymphocyte and its central role in the immunological processes of the body.

BENJAMIN A. BARNES, MD
Department of Surgery
MGH and HMS

The above report was presented at a press writers' meeting conducted on April 1 at Palm Beach, Florida, by the American Cancer Society.

Homayoun Kazemi, MD

New Head Appointed For Pulmonary Unit

DR. HOMAYOUN KAZEMI has been appointed Chief of the Pulmonary Unit to succeed Dr. K. Frank Austen, who is now Physician in Chief at the Robert B. Brigham Hospital. Dr. Kazemi will be assisted by Dr. Denise J. Strieder.

Dr. Kazemi, a native of Teheran, Iran, earned the M.B. degree at the University of London and the M.D. degree at the College of Physicians and Surgeons, Columbia University. He served an internship and assistant residency in Cooperstown, N.Y. at the Bassett Hospital, which is affiliated with Columbia. He then spent two and one-half years as an American Heart Association research fellow in the pulmonary laboratory of Dr. John Mithoefer at the Bassett Hospital.

In January 1963 Dr. Kazemi came to MGH as a Resident in Medicine, and one year later was appointed a Clinical and Research Fellow. In July 1964 he was appointed to the Active Staff.

A new phase in the development of the Pulmonary Unit begins with the arrival and installation of the new Allis-Chalmers cyclotron, which will be housed in the heavily shielded subbasement of the Harold Whitworth Pierce Cardiopulmonary Research Laboratories. This machine, described in the February issue of *The NEWS of MGH,* will produce short-lived isotopes for clinical investigation in pulmonary physiology and related areas.

The operation of the cyclotron will be the responsibility of the Physics Research Laboratory under the direction of Dr. Gordon Brownell. Among the other units that will utilize the products of the cyclotron are the Cardiac Unit, headed by Dr. Edgar Haber, and the Surgical Cardiovascular Unit, headed by Dr. W. Gerald Austen.

Sixth General Hospital

The Sixth General Hospital, the MGH unit in World War II, was activated at Camp Blanding, Florida, on May 15, 1942, under command of Col. Thomas R. Goethals, MC. On the same date, most of its original officers and nurses convened at MGH, were placed on active duty status, and began the train trip to Florida. On February 19, 1943, advance detachments of the Sixth debarked at Casablanca, French Morocco, and on February 27 the Sixth admitted its first overseas patient. Subsequently, it was stationed in Rome and Bologna, and was deactivated on September 15, 1945, at Leghorn, Italy.

As the 25th anniversary of its activation draws near, the officers of the Sixth and their wives will converge on Plymouth, Massachusetts, for a reunion on May 6 and 7. The highlight of the entertainment will be a half hour of movies taken in 1942 by Dr. John B. McKittrick.

The memoir of the Commanding Officer of the Sixth General Hospital which begins on page 3 opposite, is indeed appropriate. It was written by his brother George, a retired colonel of the Corps of Engineers, USA, who was an outstanding MGH Volunteer from November 1961 through June 1964.

The NEWS of MGH

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A Memoir of Thomas Goethals, MD

Tom was born the younger son of then Lieutenant George W. (later of Panama Canal fame) and Effie Rodman Goethals, December 14, 1890, at New Bedford, Mass., in the home of his maternal grandfather, Captain Thomas R. Rodman, Harvard Class of 1845, classical scholar, and Union veteran of the Civil War. The latter proved an important influence to shape Tom's later courses at Harvard and to inspire his active entry into two wars and voluntary offer to serve in a third.

Prior to his college days, his father had to change his Army station five times, so that his early education was essentially from a mixture of the public schools of Washington, D.C. and Newport, R.I.; with preparation for his Harvard entrance examinations at University School, Washington.

Entering Harvard in 1908, he completed work required for his bachelor degree in 3½ years, *cum laude*. Choosing a career in medicine, he graduated from Harvard Medical School in 1916, second in a class of 76, *magna cum laude*.

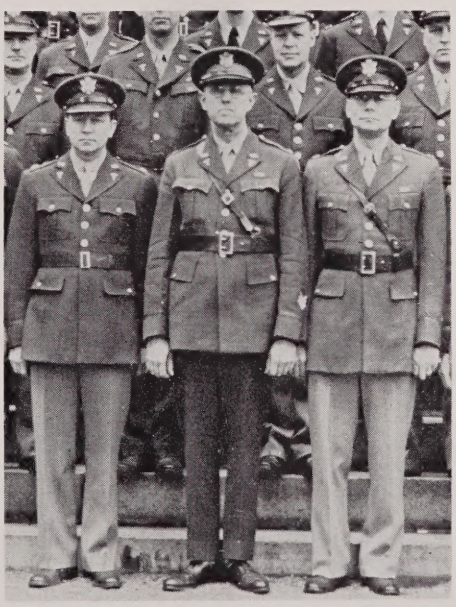
His vacation periods were spent in a trip to Germany, one around South America, and annual visits with his parents in the Canal Zone, where he was a frequent observer at the various Ancon Hospital Clinics for latest developments in surgery and tropical medicine. He would also accompany survey parties into virgin jungle to see native life on the spot and witness first hand some of the pests of jungle existence.

On attaining his MD degree, Tom was accepted as surgical "house pupil," as then termed at MGH, while being offered the post of assistant to the well known obstetrician, Dr. Franklin S. Newell. Certain at that time the United States was bound to get into World War I, he had enrolled in what was to become Base Hospital No. 5, noted as the second of our units to go overseas and the first attached to the BEF. He reported for active duty May 6, 1917 and the unit shortly found itself in France, where he was a ward surgeon caring for severely wounded British soldiers. His original C.O. was Major Robert U. Patterson, to whom he was devoted and who influenced his future active career. Just in time for the Argonne campaign, Tom was transferred to U.S. Mobile Hospital No. 6, First Army, AEF, with headquarters at Deux-Nouds. Most of this time he was commanding a field hospital between Varennes and Cheppy as the wounded poured in from Montfaucon and other famous points of resistance in that operation. His active service closed January 18, 1919 in Washington, whither he had returned soon after the armistice, with the same 1st lieutenant's bars worn when he was activated, in accord with Medical Corps promotion awards of that era.

After nearly two years' absence, he was fortunate in rejoining the House Staff of MGH while Dr. Newell's offer still held good, and he completed also a six-month internship at Boston Lying-in Hospital. On June 3, 1919 he married his sweetheart, Mary Addison Webb, of Washington, D.C., in St. John's Church. Three sons were born to them: Thomas Rodman, Jr., Henry Webb, and Peter Randall. None followed his father's profession.

He opened his own office in September 1920, although his association with Dr. Newell continued for some time after. His patients brought him to many of the best known hospitals of Greater Boston, but it was at the Lying-in Hospital and MGH where he was to be found much of his time till the latter closed its obstetrical beds in the late forties and his services as Consultant in Obstetrics at MGH were completed. He taught many years at Harvard Medical School, climaxing there by becoming Clinical Professor of Obstetrics, Emeritus, in 1957.

In 1925 his former C.O. in France had become Major General Patterson, Surgeon General of the Army, who persuaded many former officers to join the Organized Reserves. Tom did so, even taking half of some of his usual month's vacation on active duty. This kept him in line to command, as a colonel, the proposed Sixth General Hospital, organized largely from MGH personnel, and sponsored early in 1940 by vote of both Staff and Trustees. In May of 1941 he closed his office, remarking he never expected to have a private patient again, and went on active duty with the Surgeon of First Army at Governor's Island, N.Y. It was still before Pearl Harbor, but the future was obvious to any who could rationalize. In May 1942, the Sixth General Hospital was activated at Camp Blanding, Fla.



Detail from group photograph taken in front of Bulfinch Building on May 15, 1942. From left: Maj. Edward Bland, Col. Thomas Goethals and Lt. Col. Donald King.

He wrote, "I served as C.O. of this unit almost 3 years, covering its training period at Blanding, its movement overseas, its first station for active operation at Casablanca, French Morocco, and its second station at Rome, Italy."

Tom's active duty tours of the preceding few years had prepared him to whip his outfit into shape in quick time. He was strict on discipline. Before permanent messes could be set up and chow lines were still used, Tom would be seen, mess kit and tin cup in hand, taking his place at the end of the line and working up to the field kitchen the same as an enlisted man. If some junior officer was seen trying to barge in near the front end, he was duly ordered back to the rear end of the line by his C.O. When Maj. Gen. Everett S. Hughes, General Eisenhower's deputy and trouble shooter, inspected the outfit at Casablanca after it was taking in wounded, he gave it high praise, — then took the C.O. out to watch a soldiers' baseball game from the bleachers.

After the collapse of the Italian front, one component of the Sixth after another was detached and sent to staff general hospitals in other theaters, so that eventually Tom found himself without a job and returned home as a casual to command Lovell General Hospital at Fort Devens, Mass. from March 1945 to the start of his terminal leave the following December.

In February 1946 he resumed obstetrical practice in Boston and, against his earlier doubts, patients began to come to him again, and by the end of 1947 he was quite as active as in 1940. He also accepted a new 5 year commission in the Medical Corps Reserve, and in 1949 was promoted to Brigadier General and assigned to command the 803rd Hospital Center, conducting two 15 day field training periods, one of the latter at Fort Devens. On his 60th birthday in 1950 he was placed on the retired list under the new Army regulation. When the Korean War broke out he again volunteered for active duty, but was turned down, probably

Continued on Page 4

Dr. Goethals . . .

Continued from Page 3

because he was then only 4½ months from mandatory retirement age for a Brigadier General.

Traveling was one of his hobbies. In 1954 he took a trip to the Canal Zone to represent the family at the dedication of a memorial fountain to his father. Later in the same year he visited Mexico City. Other than as mentioned, his vacation periods were spent at his old farm house in Lambert's Cove on Martha's Vineyard.

In January 1956 a painful throat condition was diagnosed as cancer of the larynx resulting in a radical laryngectomy. His recovery and patient, cheerful fortitude were remarkable. Within 60 days of the operation he was visiting in Las Cruces, N.M., sitting on a sofa surrounded by half a dozen local members of his profession and talking to them in the only way he then knew how — by pad and pencil. Soon the electric device of a battery and a contact plate held beneath the jaw bone was developed and allowed him freer conversation in a low, buzzing monotone; but this was such a handicap both with patients and operating room procedure that he finally closed his office and practice for good in October 1957.

After removal of his larynx he was an enthusiastic visitor to our principal U.S. battlefields from Concord to Vicksburg, especially those of the Civil War where he got right down to divisional movements, often to the edification of some official guide. But he never had a chance to go over his overseas stamping grounds, for he and Mary sacrificed a planned trip to Europe early in 1961 to go to New Mexico to take care of the home and affairs of his brother during the latter's long serious illness. It was a characteristic service of unselfishness by both that could never be repaid.

In the summer of 1961, just 5½ years after his larynx cancer, he developed severe abdominal pains, soon diagnosed as from a growth in the pancreas. Removed by surgery in September, it was found malignant. His family was encouraged by his immediate postoperative condition, for he regained strength and became energetic enough to drive his own car again, even as far as Lowell for Thanksgiving. In mid-December, however, he began to fail, and the downgrade became steeper all the time until "Release from Quarters" sounded early in the morning of March 23, 1962 at his Brookline home. His courage and cheerfulness were remarkable. He received and talked to old friends right to the last — a living lesson of superb fortitude to all who visited him. His remains are buried in the old Lambert's Cove cemetery only a quarter of a mile from the home he loved so well.

He had keen wit and a high sense of the ridiculous, always the life of any group of friends. He took life as it came, with many likes and few antipathies. The latter are best summarized in his own wry entry in his 25th Class Report, when he wrote, "I am singularly free from prejudices save against cauliflower, literal and pompous people, bridge, aesthetic dancers, and the seats usually assigned me at the Yale football game." Even during his final days, he quipped to a visiting classmate, "You know I'm not the man I used to be, and never was."

He was a member of several learned medical societies and wrote extensively on obstetrical and allied subjects for various medical periodicals. Most important is a chapter on Breech Presentation in a Textbook of Obstetrics by Duncan E. Reid, MD, Professor of Obstetrics at Harvard Medical School.

Soon after his death, a committee was formed to alter and renovate a section of Richardson House, Boston Lying-in Hospital, as a permanent memorial to his honored memory, and where such a large number of his patients had been cared for.

In most walks of life — notably in the medical, military and teaching professions — one's superiors see those traits in a man which lead to his promotion and advancement. Tom's associates and friends get a much wider view of the whole as when the Boston Lying-in "lost one of its most distinguished doctors and a brilliant, conscientious teacher. His patients lost 'their' doctor, and his friends, a man whom they held in great esteem and affection." But it takes subordinates "who saw life steadily and saw it whole" to make the broad horizon appraisal. His soldiers understood him; so did his pupils and young doctors seeking his advice. It was a Harvard Medical School class which made appreciation most articulate in dedicating to Tom their *Aesculapiad:*

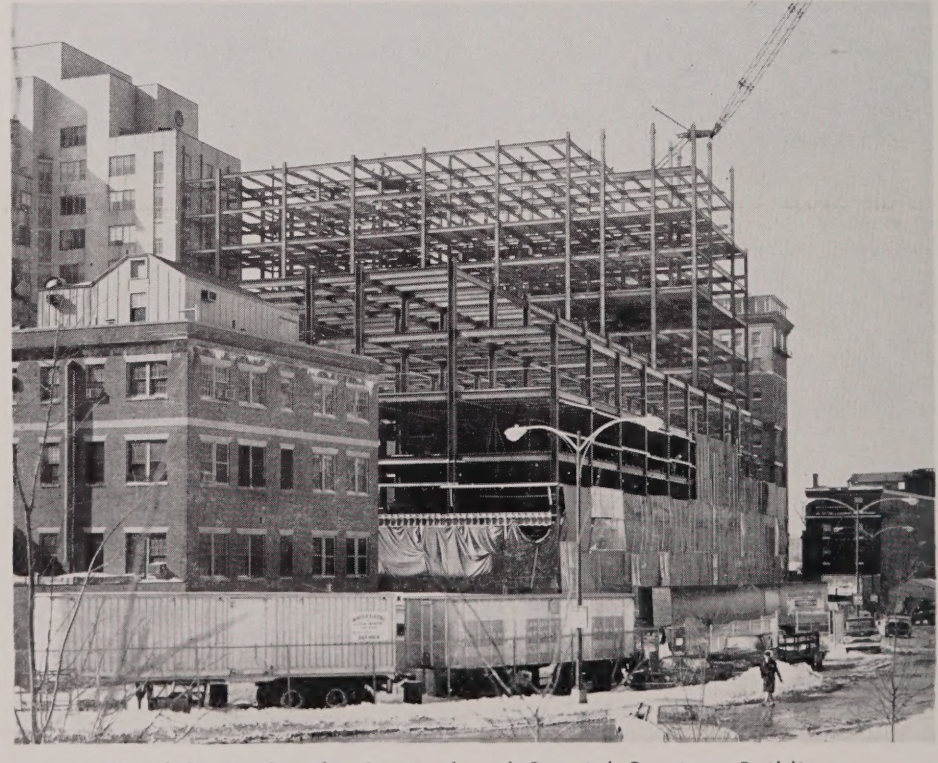
"With this dedication, the Class of 1956 expresses its sincere gratitude for all your efforts in its behalf. Having met with you in small groups, its members have come to know you in a very personal way as a tireless, clear-thinking, cheerful and considerate physician, teacher and friend."

— Brother

Communications Center

The communications explosion at MGH reached by January 1, 1967 a total of more than 50,000 telephone calls daily over 1,861 lines and 2,565 sets. The average daily number of page calls has increased from about 550 in 1965 to more than 1,200 at present. In rush periods the page operators may handle as many as 130 calls hourly.

The Communications Center now occupies splendid new quarters on White 14 and requires a staff of eleven. It is headed by Evelyn Dunn, Communications Coordinator. One of the chief operators is Mrs. Alice Harrington, who has been an MGH employee for approximately 45 years.



Steel frame for the Surgical and Special Services Building

The character of the probing medical scientist is well portrayed in this photograph of Dr. Benjamin Castleman, taken by David A. Lang, a student in the MGH School of Medical Illustration.

Dr. Castleman Honored

Dr. Benjamin Castleman, Chief of the MGH Department of Pathology, and Professor of Pathology at HMS, has been awarded the honorary degree of Doctor of Medicine by the University of Göteborg in Sweden, in recognition of his accomplishments in the field of endocrine pathology. He received this honor at the University's traditional *Doktorspromotion* ceremony last October 22. The citation was read in Latin, and the ritual included a two-gun salute as the *Promotor* lowered a fluted silk top hat on the recipient's head and placed a gold ring on the left index finger.

Two years ago Dr. Francis O. Schmitt, a professor at MIT and a member of the MGH Board of Trustees, received a similar award at Göteborg.

MGH Briefs

Dr. Kurt J. Isselbacher, Chief of the Gastrointestinal Unit, has been appointed to a 3-year term as Chairman of the MGH Committee on Research, beginning on March 1, 1967. The scope of research at MGH is evident from the fact that in 1965 approximately 880 research projects were under way or completed in 62 laboratories and units by 799 staff investigators, fellows, and assistants. More than 900 papers by these researchers appeared that year in journals.

Dr. Paul D. White, a member of the MGH Board of Honorary Physicians, is the subject of an oil portrait painted by Alfred Jonniaux and recently donated by the artist to the National Library of Medicine.

Dr. Claude E. Welch, Visiting Surgeon, has been named chairman of a 28-man standing committee on surgical education in medical schools by the Board of Regents of the American College of Surgeons. Other MGH surgeons on this committee are Dr. Edwin F. Cave and Dr. Oliver Cope.

Dr. and Mrs. Bradford Cannon will be hosts for the annual picnic for international visitors and house officers on May 30 at their country house in Lincoln, Mass.

Dr. Dana L. Farnsworth, a member of the MGH Board of Consultation, and Director of the Harvard University Health Services, delivered the opening address at the 8th annual meeting of the Academy of Religion and Mental Health in Boston on April 18. The Academy is a multifaith organization with more than 4,000 members from the professions of religion, medicine, and behavioral science.

The Spring Dinner Dance conducted by the Service League and the Distaff Club will be held on May 20 at the Harvard Club. The co-chairmen are Mrs. Eldred Mundth (Distaff) and Mrs. George Baker, Jr. (League).

Miss Adelaide M. Coleman has received the fifth Jessie Harding Award for Volunteer Services at the MGH. She is now in her ninth year as a Volunteer on the wards.

Dr. Francis D. Moore, a member of the MGH Board of Consultation, and Moseley Professor of Surgery at Harvard, has been elected an Honorary Fellow of the Royal College of Surgeons of England. He received the honor on April 4 in London, and also delivered an address at the Lister Centenary celebration.

Miss Mary Ruth Wolf, Director of the Volunteer Department, has been conducting a series of meetings at Charles River Park to explain the opportunities for engaging in volunteer service at MGH. By the end of March, 45 residents of Charles River Park had contributed 6,025 hours of service.

The Employees' Spring Dance was held on April 21 in the Louis XIV Ballroom at Hotel Somerset. Co-chairmen of the committee were Mal McLean of the Electric Shop and Tony Giarrusso of the Maintenance Department.

The McLean Hospital Auxiliary is planning a benefit party on June 2 — "Opening Night at the Circus."

Several hundred new Wedgwood Queensware service plates, designed originally for the 150th anniversary of MGH, are again available at $4.25 each through the General Store and Gift Shop conducted by the Ladies Visiting Committee. The design of this 10½ inch plate shows a view of the original Bulfinch Building and wharf, enclosed within a clover border — all in MGH blue.

The Coordinated Program in Retrospect

Part 2

Part 1 of this article appeared in the February issue of The NEWS of MGH *and covered the history of the Coordinated Program from its beginning in 1946 until 1959. The conclusions of a critical study of the Program made in 1958 by the sociologist Everett C. Hughes had been considered carefully. Although his recommendations could not be implemented within Harvard University, a new plan and a new curriculum were instituted.*

The findings of Mr. Hughes and the stimulating, helpful conversations held with him and his assistants fostered the needed impetus to completely redesign the curriculum. Since there were still some undergraduates at Radcliffe who signified their intention of completing the program, the plan in effect from 1946 to 1959 was phased out gradually. It now became the role of the nursing faculty to exert pressure on the wavering and indecisive among those enrolled to decide not to finish the nursing curriculum; others stayed.

For admission under the new curriculum, applicants were required to be graduates of liberal arts colleges with creditable achievement. No specific major or course requirements were made, except that a course in general or inorganic chemistry must have been completed satisfactorily. Through the young woman's own college or through Harvard or the Massachusetts Institute of Technology, an applicant already graduated from college without chemistry was permitted to present evidence from the head of the chemistry department that she had completed creditably by a tutorial arrangement the equivalent of a course in general chemistry. The chemistry instructor on the faculty of the Coordinated Program guided the selection of content toward a desirable basis for advanced courses. Thus, one of the biggest obstacles to admission was overcome.

Recruitment activities were intensified in kind and distribution. Deans and placement officers in Eastern women's colleges were sent newly prepared materials. Even undergraduates in the junior and senior years at Radcliffe began to apply. The Committee on Admissions of the Coordinated Program now included a member of the preclinical sciences faculty, a doctor of medicine who served also on the Harvard Medical School Committee on Admissions, the Chairman and one nurse faculty member of the Coordinated Program. Academic standing and personal qualifications of students were improved somewhat because of the increased number of applicants. Though the number admitted each year stayed small, the size of the classes increased, so that an upper limit was placed to avoid jeopardizing the quality of the instruction, particularly in the clinical nursing courses. The learning experiences were carefully selected by the clinical faculty. The teaching was based on truly educational aims. Superior learning opportunities were afforded by field agencies.

The student now entered the Program in the last week of June. She spent the summer term studying two courses: Anatomy and Physiology, and Organic Chemistry and Biochemistry. Vacations to a total of ten weeks were interspersed among the remaining two calendar years. The courses in the fall term were Microbiology, Human Growth and Development, Cultural Anthropology, Principles of Nutrition, and Foundations of Nursing.

It should be noted that sound nursing courses must be based on the students' knowledge of physical, biological, and social sciences. The faculty have found that no other factor so promotes unintelligent, unsound nursing care as having to teach nursing care and procedures to students who have limited scientific knowledge ready to use. This obstacle to sound learning was nearly overcome under the new Program. Many nursing practices are based to some degree on an understanding of principles derived from Microbiology, and so the course in Foundations of Nursing could not be designed as well as was desired.

Another persisting weakness stemmed from the absence of members of the faculty qualified to implement the inclusion of concepts of mental health and interpersonal relationships in every course, and from the lack of a highly qualified nurse faculty member for psychiatric nursing. In two terms of the revised Program, however, a psychiatric nursing instructor demonstrated what might have been accomplished among faculty and students. Reasons have been indicated in Part 1 of this article to show why the Program could not hold as many qualified teachers as were needed.

In terms 3 through 9, nursing courses in the following sequence were given: Medical-Surgical Nursing I and II, Maternity Nursing, Psychiatric Nursing, Nursing of Children, Public Health Nursing, Medical-Surgical Nursing III. Courses in the History of Medicine, Public Health, and Nursing; Principles of Learning and Teaching in Health Education; Principles of Administration; Nursing during Disaster; and Contemporary Professional Nursing were distributed throughout these terms. Three courses in any term were the maximum. Throughout the curriculum, a strong emphasis was placed on the promotion and maintenance of personal, family, and community health and on rehabilitation. In addition to the agencies used for the major courses, students became acquainted with the programs and facilities of 43 other social and health agencies in greater Boston.

In addition to a redesigned curriculum, the courses and concurrent field experiences were improved to help the student approach learning analytically, and to develop skills and insights as independently as she was capable of doing. Self-evaluation was fostered. In order to provide time for appropriate study, and to allow the student to continue her diversified interests established in college, the hours scheduled per week were restricted to 10 to 12 hours of class or conference and 18 hours maximum of nursing experiences, which were scheduled on Tuesday, Wednesday and Thursday to allow for as much continuity of patient care as possible.

Another change was made when the new curriculum was initiated. Until 1959, students in the Program had no identifying uniform to indicate that their academic background or course differed from that of the diploma students. At first, a certain protective coloring was afforded. Ultimately, it became clear that the lack of identification was compounding the obscurity of the Program. The students were invited by the faculty in 1959 to design their own unique uniform, an enterprise into which they entered with great verve, and their designs for cap and dress were accepted. The faculty designed a pin for graduates to wear. Only those people who have worn a uniform in a setting where it has special significance can realize its effect. The fact that this was a different and separate program became gradually somewhat better understood.

The curriculum designed for use in the 1959-61 period was modified many times. The faculty found continually new opportunities for improving the teaching approach and selecting the learning experiences.

Between 1946 and September 1966, 51 young women graduated from the Program. Since 1960, 31 students graduated, of whom 21 were from colleges other than Radcliffe. There is much evidence that the friendly competition among the representatives of the various colleges had its own benefits. Failure to maintain academic standards, and lack of suitability for nursing account for the 3 students who left. It will be noted that three-fifths of all

students who graduated completed the Program in the last six years.

A strong feeling developed among the students and graduates of the revised Program, as well as the earlier one, so that a remarkable esprit de corps and belief in this kind of nursing education exists among them.

However, there remains the old stumbling block of the unattainability of accreditation by the National League for Nursing, compounded by the withdrawal of Radcliffe from the arrangement. The Coordinated Program was admitting college graduates. It had been found after continuing investigation by members of the Board of Trustees and by others at MGH that the situation at Harvard would not permit a school of nursing. Also, by this time, new and more stringent regulations concerning the employment of graduates of unaccredited nursing programs had been made by some employing agencies.

Graduates of programs which prepare for public health nursing find in this field the greatest opportunities for originality, independence, and community-oriented preparation. Public Health nursing agencies have been pre-eminent in their efforts to attain sound standards. More of the graduates of the Coordinated Program chose to enter public health nursing than any other field, and they were being employed on the pay scale level for graduates of programs in which preparation for public health nursing is not a part. In one state, any public health agency which receives state monies may not employ the graduate of an unaccredited program.

Another problem arose when graduates of the Coordinated Program wished to matriculate for advanced study in nursing programs. While some graduates have been permitted to enroll for study in university nursing programs after the results of their qualifying examinations and undergraduate programs were evaluated, others have been required to take stipulated courses to meet school of nursing requirements for a bachelor of science degree in nursing.

Since no progress had been made in achieving a college or university relationship, graduates of the Program were encountering barriers to employment and continuing study. Furthermore, the lack of accreditation affected the recruitment of students and faculty. Therefore, the decision was reached to terminate the Program with the class which graduated in September 1966.

If a relationship with a univeristy should ever become possible, it is imperative that the conditions of accreditation be met. Nursing in the United States needs to have one or more demonstration centers in which educated young women study nursing under the direction of a superior faculty capable of designing and implementing an imaginative curriculum unfettered by outworn thought and practices.

G.H.J.

Would college graduates enter such a program? We believe so. And what would such nurses do? Not at once what so many people presume. The days are fortunately past when a graduate of a good school of nursing can become director of a hospital, a nursing department, or a school of nursing, or become a teacher the day after she graduates. Nursing has yet to reward the practitioner of nursing by esteem or income. There are developing presently, now that medical practice requires more of nursing than baths and poultices, opportunities for nurses with sound education and experience to take their place in clinical nursing practice where they may influence the level of nursing care by their knowledge and ability. Staff nurse experience of one year, at least, is needed as a base for this activity.

Graduates of the Coordinated Program have started, appropriately, to gain experience at the staff level. Specialization, teaching, administration, and research may be prepared for subsequently. The dimensions of knowledge, understanding, and ability which graduates bring to a nursing program based on a liberal arts education make it possible for them to function in what may truly be conceded to be a professional way. They find professional nursing a challenge to their abilities. They are eager to cooperate equally with those now unquestionably designated professional in the promotion of health, the prevention of illness, the care and rehabilitation of the sick in a variety of community agencies and among families in their homes.

Sylvia Perkins, RN
Asst. Director, School of Nursing
Chairman, Coordinated Program

David A. Lang

Mr. Thomas J. Kelly (above) formerly guarded the Allen Street Gate, and today is stationed at the Parkman Street Gate. In the picture on the left, he stands at the entrance to the MGH Power House, which was built in 1898 and demolished in 1965.

75th Vincent Show

The 75th annual Vincent Club Show, a musical comedy entitled *Facts and Figures,* was presented at the New England Life Hall from April 11 through 15, the proceeds to be turned over as usual to the Vincent Memorial Hospital. The show won very favorable reviews in the Boston newspapers.

Mrs. Richmond Holder wrote the book, and other Vincent Club members wrote both music and lyrics for all the songs. All members of the cast were Vincentonians. The show was staged and directed by Michael Douglas, and choreographed by Tommy Tune. Ruby Newman's Orchestra was directed by George Gould. The breezy plot sent federal spies on an investigation of the price-fixing racket in the beauty-aids industry, much of the action taking place on lush El Rancho Relaxo in Texas. In the traditional Vincent Drill number, the girls were costumed in white rodeo dresses and black hats. Also featured was a computer system that filed and delivered human agents.

Mrs. Edwin Hiam was chairman of the show committee, assisted by Mrs. Samuel Drury and Mrs. Ezra Stevens.

The net proceeds of the first 74 Vincent Shows total $1,439,630. The 1966 show earned $48,000. The first production earned $494.50 in 1892, and was staged by alumnae of Mrs. Shaw's School for Girls in order to aid the new Trinity Dispensary for women in the West End, predecessor of the Vincent Memorial Hospital.

Treadwell Library

The most outstanding event of the past year was the acceptance by Miss Glee A. Rundgren of the position of Assistant Librarian and Cataloger on the staff of the Treadwell Library. Miss Rundgren attended Coe College for two years and received B.A. (1964) and M.A.L.S. (1965) from the University of Minnesota.

The task of revising the Library's card catalog and, concurrently, cataloging new acquisitions and recataloging where necessary the monograph collection begun in 1958, has been Miss Rundgren's chief responsibility. The work has progressed steadily and a great improvement is evident. As a pilot project the Cabot and Evarts collections in the Cabot Memorial Room were completed first. This experience provided the guidelines to be used for the work in the Treadwell collection and catalog.

During the spring of 1966 the Library was repainted. All areas, except the Reference Room, now have Colonial gray walls with white trim and ceilings, which especially enhance the beauty of the Reading Room and give the illusion of more space in the other areas. Drapes were hung at all the windows. A new and more efficient mahogany circulation desk replaced the old one, and the bulletin boards were rearranged so that a group of historical pictures could be hung on one wall.

Staff Publications for the year 1955 were sent to the bindery during the past year. Special thanks go to Miss Bernice Sweeney, the Volunteer who worked so faithfully to get them ready, and Miss Anne Balfour, who did all the necessary typing of indexes and cards. Mrs. Hiram Crowell continues to work as a Volunteer on the Surgical Fatality Reports. During the year four volumes were bound so that they are in a more convenient form for study.

At present the Treadwell Library has a staff of five full-time and four part-time employees. The help and advice of the members of the Treadwell Library Committee, as well as many other members of the Hospital Staff, has been greatly appreciated.

For the many books and serials given to the Library by individuals and the various services we are grateful. These gifts make it possible for us to have circulating copies of the more heavily used serials. During the past year over 1,300 of those journals which we did not need were sent to other medical libraries through the Medical Library Association Exchange. A list of donors is kept on file in the Library.

GENEVIEVE COLE, *Librarian*

In the Chapel

Pause for a moment in your hurried flight,
Gaze on the Rose Window's glorious light,
Think as to how you can do what's right,
In the Chapel.

The Chapel is for all within the walls of the Massachusetts General Hospital. It serves all kinds of people.

To the patient and his friends it offers a place where they may give thanks or ask for help.

To the devout it offers a place for prayer.

To the philosopher a place for meditation.

To the harried doctor worried about his patients a place where quiet thought may solve his problems.

To the tired nurse a place where she may rest, if only for a few moments.

To each and every person in this Hospital the Chapel says: Come, and I will share your burden.

One minute in the Chapel may
Brush all your troubles far away,
Bring joy to both your work and play,
Bring peace of mind with you to stay.
So to the Chapel come and rest,
Somehow 'twill help you do your best.

— *A friend of MGH*

Under the Rose Window

The photograph by George Burton reproduced on page 1 of this issue shows the Rose Window in the nondenominational Chapel of the MGH. The stained glass windows in the Chapel were designed by the eminent artist Charles Connick. They contain symbols which, along the west wall, represent the eight beatitudes and, in the clerestory and rear wall, represent the seven corporal works of mercy.

The Chapel was opened for services on April 6, 1941. It was made possible through the fund-raising effort of the Rt. Rev. William Lawrence, then retired Bishop of the Protestant Episcopal Diocese of Massachusetts. People of many faiths responded generously to Bishop Lawrence's appeal.

During major holidays of the various faiths, appropriate symbols and literature are displayed in the Chapel, and floral displays are provided by the Ladies Visiting Committee. Chapel concerts are sponsored by the Service League, primarily for the benefit of patients. Recorded music is provided almost daily. During the summer when the nondenominational Institute of Pastoral Care is in session, daily services of prayer are held to which all are welcome. The motto over the door reads: WHOEVER WILL, MAY ENTER HERE.

MGH Pops

MGH Night at the Boston Pops in Symphony Hall is scheduled for Wednesday, May 31. The Pops Committee, headed this year by Mrs. Austin L. Vickery, Jr., of the Service League, has again reserved all of the 1,186 seats on the main floor for MGH. This committee includes representatives from all major hospital departments and from the Service League, Ladies Visiting Committee, and the Distaff Club.

Memories of last year's MGH Night at the Pops remain vivid. The highlight of that program was the guest soloist Mrs. Alice Wilkinson, wife of Dr. Harold Wilkinson, formerly a neurosurgical Resident at MGH. She played Mozart's piano concerto in F major.

Another lady known at MGH appeared last year as soprano soloist on Wellesley College Night at the Pops. She was Mrs. Leslie Holmes, wife of Dr. Lewis Holmes, formerly a pediatric Resident at MGH.

Chapel Concerts were presented by the Service League in March and April. One concert was given by four members of the hospital family: David Alpers, MD, clarinet; William Hammond, horn; Kilmer McCully, MD, violin; and Joseph Stukas, piano.

Letters on Radcliffe-MGH Coordinated Program

to the following:

Mrs. Edward D. Eddy, University of New Hampshire, Dublin, N.H.

Miss Helen Curtis, University of Massachusetts, Amherst, Mass.

Mrs. Geoffrey May, Wheaton College, Norton, Mass

Miss Mary j. Pearl, Sweet Briar College, Sweet Briar, Va.

Miss Gertrude Noyes, Connecticut College for Women, New London, Conn.

Mrs. Elizabeth B. Kelly, Middlebury College, Middlebury, Vt.

Miss Jean Palmer, Barnard College, Columbia University, New York, New York

Miss Marian Tait, Vassar College, Poughkeepsie, New York

Miss Helen Randall, Smith College, Northampton, Mass

Mrs. Nathaniel Marshall, Bryn Mawr College, Bryn Mawr, Pennsylvania

Miss Meribeth Cameron, Mt. Holyoke College, South Hadley, Mass.

Miss Nancy Lewis, Pembroke College, Providence, Rhode Island

Mrs. Joan Bishop, Wellesley College, Wellesley, Mass.

Sister Mary Lucilla, Regis College, Weston, Mass.

Miss Leith Shackel, Carleton College, Northfield, Minnesota

Miss Martha Grafton, Mary Baldwin College, Staunton, Virginia

Miss Susan Cobbs, Swarthmore College, Swarthmore, Penna.

Miss Laura Bornholdt, Sarah Lawrence College, Bronxville, New York

Lectures on Kierkegaard Coordinated Programs

given the following:

Rev. Edward D. Daly, University of Notre Dame, Notre Dame, Ind.

Miss Helen Curtis, University of Massachusetts, Amherst, Mass.

Mrs. Geoffrey Day, Wheaton College, Norton, Mass.

Miss Mary J. Pearl, Sweet Briar College, Sweet Briar, Va.

Miss Gertrude Hayes, Connecticut College for Women, New London, Conn.

Mrs. Elizabeth B. Kelly, Bradbury College, Middlebury, Va.

Miss Jean Palmer, Barnard College, Columbia University, New York, New York

Miss Marion Reid, Vassar College, Poughkeepsie, New York

Miss Helen Randall, Smith College, Northampton, Mass.

Mrs. Rasmussel Merrimall, Bryn Mawr College, Bryn Mawr, Pennsylvania

Miss Gretchen Cameron, Mt. Holyoke College, South Hadley, Mass.

Miss Nancy Lewis, Peabody College, Nashville, Tennessee

Mrs. Jean Blaisdell, Wellesley College, Wellesley, Mass.

Eleanor Mary Morrill, Hagin College, Boston, Mass.

Miss Beth Stowell, Hopkins College, Northfield, Minnesota

Miss Emma Gretton, Mary Baldwin College, Staunton, Virginia

Miss Susan Gorha, Westhouse College, Swarthmore, Penn.

Miss Laura Barnhart, Sarah Lawrence College, Bronxville, New York

OFFICE OF THE DEAN
RADCLIFFE COLLEGE
CAMBRIDGE 38, MASSACHUSETTS

APR 11 1960

April 7, 1960

Dear Miss----------:

We are writing to call your attention to a program in nursing sponsored jointly by Radcliffe College and the Massachusetts General Hospital School of Nursing. The program is unique in that only those students holding the bachelor's degree will be admitted. As the enclosed statement indicates, it will be designed to meet the needs of those students who have had a broad college background.

Radcliffe College has had in conjunction with the MGH School of Nursing a coordinated program for some years. The basic premise in founding the program, was that there should be an opportunity in at least one place in this country for nurses to be educated rather than trained. In short, this was an attempt to do for nursing education what medical schools have for so long insisted upon. Our students in the program have taken, along with their regular liberal arts work, courses at the School of Nursing throughout their four undergraduate years with us. They have then moved on to the School of Nursing where they have done full-time work for slightly over two years at the end of which time a joint diploma in nursing is granted.

The numbers, however, are small and we are therefore attempting to increase the size of the group by opening up the program to students holding the bachelor's degree from other colleges. We know that this letter is late in reaching you but we hope you will keep the program in mind in advising your students. If you are not the person who advises senior women, would you kindly pass this on? A copy of this letter and a second statement describing the program are enclosed for your placement officer.

If you have further inquiries about the program, may I suggest that you write to Miss Sylvia Perkins, chairman of the program at the School of Nursing at the MGH.

We shall be grateful for whatever attention you may be able to give this letter which we know is one among many seeking your help in directing students to a variety of graduate programs.

Sincerely yours,

(Mrs.) Kathleen Q. Elliott
Dean of I struction

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It is now our purpose to establish a graduate program which will take its place. Students who have received the bachelor's degree will spend slightly over two years at the MGH School of Nursing at the end of which time they will receive a joint diploma. The unique features of the program are, first, that it will be open only to students who hold the bachelor's degree, and second, it will be a program especially designed to meet the needs of students who have had a broad liberal arts background.

We are writing a selected group of colleges with the hope that student advisers will bring it to the attention of any seniors interested in nursing. I know that most of your seniors have already made their plans for the coming year. If, however, you know of any now or in the future who might be interested in nursing, we should be grateful if you would have them consider this program. We believe it will be a good one. A copy of this letter and a second statement describing the program are enclosed for your placement officer.

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All good personal wishes.

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RADCLIFFE RE-NEWS

VOL. 6 CAMBRIDGE, MASSACHUSETTS, DECEMBER, 1952 NO. 4

'Cliffe Jargon

ANN GEER '53

Radcliffe, no longer a "blue-stocking" college, is now commonly known as the *'Cliffe,* or at Harvard also as the *Annex.* The everyday language of *'Cliffe-dwellers* has changed through the years, and much of the present jargon might sound strange even to some of you whose college days don't seem so very far in the past.

The *Square,* the *Yard,* the *Pudding,* and the *Coop* are familiar names to all of us. But many new terms have been added. So, in the interest of keeping you up to date, here are some of the words now commonly accepted at Radcliffe.

No Crime

If there is no *Crime* (Harvard Crimson) before breakfast, the morning is not complete.

Off to classes at Harvard, the freshman is sure to head to *Gen Ed* (General Education A — the freshman composition course), *Soc Sci* (sock-sigh, Social Sciences), *Nat Sci* (Natural Sciences), or *Hum* (Humanities), those being the divisions of Harvard's required General Education program.

Upperclassmen are more apt to go to *Frye* (professor of Near Eastern Civilization) at 9 a.m., and head for *Beer* (Government professor) at 10. Courses acquire familiar names, as *Rice Paddies* (History of Far Eastern Civilization), *Boats* (Oceanic History and Affairs), *Ec for the Idiot* (Economics for the Citizen), and *One-Sexty-Sex* (Comparative Literature 166, The Modern Novel). *Soc Rel* (Social Relations) majors casually refer to *Babies* (Development of the Child), and *Bobby-Soxers* (Behaviour Problems in Childhood and Adolescence). (Ed. Note: in our day at least one course in Social Relations was known as *Drainage and Divorce!*)

Fortitude

An *extension* is permission to turn in a paper late; *guts* are easy courses.

The work program is a required non-academic time-consumer for all girls. Upperclassmen take *bells* (attending the dormitory switchboard); underclassmen have to *wait on* (serve meals). If a girl is late for her work, she gets a *warning* (extra hours of work); if she forgets, she will have *social pro* (staying in Saturday night).

(*Continued on page five, column three*)

Tutorial House: 1952 Edition

Its new decor is discreetly modern, quite different from the picturesque period settings which we knew during the 20's and 30's, but loudly acclaimed by today's tutors and students.

The philosophy and the practice of tutorial have changed somewhat since the system was launched, bravely enough, back in 1914. Problems of money and problems of faculty personnel led to rather drastic alterations.

Starting with tutorial in history, government, and economics, Radcliffe, like Harvard, extended the system to other general-examination fields. Chemistry never tried it. A few other departments experimented with it and then gave it up as unnecessary to their particular programs.

For a time, every student in the fields where tutorial was given at all was eligible for work with a tutor. Sometimes remote from their hurried Harvard professors, Radcliffe girls achieved a sound scholarly relationship with good tutors, developed intellectual self-confidence, accomplished reading considerably beyond what was available through classroom medium.

The tutorial system at all times appeared to be particularly effective for Radcliffe students. With minor variations, the system prevailed until it collided with war. By 1943-44, a shortage of teaching personnel and of money caused it to shrink, virtually to the vanishing point.

As "joint instruction" of Harvard and Radcliffe students became a reality, inevitably it became impossible to continue individual tutorial for everyone at Radcliffe. For a time sophomores with at least a B-C standing and juniors and seniors who were candidates for degrees with honors were given tutorial guidance. Others had departmental advisers and the dean's office took over an increasing amount of academic advising.

Stepped-up system

As finally introduced this year, however, a stepped-up tutorial system has replaced advisers in the five departments of English, history, government, economics, and social relations, the largest fields of concentration. Group tutorial is offered every student above the freshman level. Groups may not exceed six. Juniors may have group or individual tutorial; seniors who are candidates for honors continue to have individual tutorial. In the other fields which offer tutorial, after the freshman year it is given always to honors candidates and to others at the discretion of the department.

(*Continued on page six*)

A familiar scene today

Radcliffe Re-News

Subscription price—your interest in Radcliffe

Published by us at highly irregular intervals

Editorial Staff

Margaret Follin Bird '29
Phyllis Watts Coons '40
M. Ann Geer '53
Virginia Vaughan Gerould '19
Sara White Goldberg '29
Patricia White Harrington '46
Anne Sims Morison '35
Mary Small Moser '40
Barbara Norton '38
Joan Projansky '49
Priscilla Gough Treat '19
Mary Jane Wade '52
Elizabeth Gleason Humez '41
(*ex-officio*)

Friends and Relations

When I moved out of the Dean-of-the-College chrysalis into the Dean-of-College-Relations winged stage, it began to dawn on me that parents were distinctly people, and that Radcliffe parents were unusually pleasant and attractive people. There was a time, well within my professional memory, when the sole and cold-blooded official communication between the College and a parent began like this: "At its recent meeting the Academic Board considered your daughter's record and noted with regret that it had become unsatisfactory . . ." A semester later another note would go to the same family, which would indicate either that the daughter had "regained satisfactory standing" or that the Academic Board had "voted with regret to require her to withdraw." Personal, perhaps, were these communications, but not very cheering, and limited to the few unfortunates. It gradually became clear that the College was ignoring a large field where good human relations might work to mutual advantage.

In March, 1950, I made the first tentative approach to parents through the Fathers' Meeting in Agassiz to which I invited thirty-six fathers from professional fields not related to education, so that we could see what businessmen thought of a liberal arts education. Eighteen of these fathers accepted the invitation and all wrote most cordially, whether or not they could come. The meeting was a success, and we were encouraged to believe that parents were eager to have a closer and more friendly contact with their daughters' college.

As a result of that meeting I had hoped to start an informational Newsletter to Radcliffe parents, but the need to raise the Holmes Hall Completion Fund intervened. My first general communication with the parents was, therefore, to my regret, an appeal for funds, which followed two advisory meetings of parents in Boston and New York. Since the alumnae may not know how magnificent was the response to that appeal, you may be interested in the following table, reprinted from my Annual Report:

Class	*Number of parents contributing*	*Per cent of class*	*Amount contributed or pledged*
1955	73	25.5%	$ 5,505.00
1954	73	27.0%	29,118.40
1953	68	27.5%	8,507.56
1952	43	20.0%	5,621.00
1951	28	15.0%	4,655.00
Before 1951	44		5,945.00
One anonymous parent			90,728.36
			$150,080.32

The idea of the Newsletter was not abandoned, however, and in October, 1951, Number I, Volume I, of the Radcliffe Newsletter went to the families of the four classes then in college, plus those of the 1951 seniors. A number of congratulatory letters (they would be called fan mail in other circles) indicated that this experiment was welcome, and a second letter went out in February, 1952. This was written by Dean Kerby-Miller and contained a clear explanation of the process of choosing a field of concentration at Radcliffe. In October, 1952, the third letter was sent, taking the form of a report on the success of the Holmes Hall effort, as well as notes on a few interesting events at college. The fourth is planned for February, 1953, and I hope that President Jordan will write it.

Latest hope

Our latest hope is to form a standing Parents' Committee, with rotating membership, to meet perhaps twice a year at the College and to give us informal advice on what would be interesting to parents.

One important share in the expanding College-parent relationship falls to the Radcliffe alumnae, particularly those in areas where there are Radcliffe Clubs. The list of local students and their parents is being sent to all Club presidents, with the suggestion that the families be invited to join Club activities. The Radcliffe Club of Lower Fairfield County (Connecticut) wishes the Radcliffe mothers to hold associate membership, an excellent idea. At least one Radcliffe occasion a year ought to be planned so that fathers may come too—as well as alumnae husbands, on whom the College officers look with approval. Particularly when one of us from Radcliffe is visiting in your community, we should like the chance to meet our students' families as well as our alumnae. Anyone not in a Club area who would like to know if there is a Radcliffe student in her neighborhood, is urged to write me, and I'll gladly give that information. The Radcliffe bond can be a very strong and happy one.

Is there really an ulterior motive in all this? It depends on what you mean by "ulterior." I like good will and informal, friendly contacts, and such things cannot possibly work against Radcliffe. I think parents can profit enormously by hearing something about Radcliffe which their daughters might not know or might fail to mention. The more alumnae and parents know about Radcliffe, the keener is their interest likely to be. And if they are interested, they will give Radcliffe their support, be it verbal, moral, or financial if now and then that has to be. In the meantime, the Radcliffe parents have doubled the already great satisfactions of my roving ambassadorship.

Mildred P. Sherman

Dean of College Relations

Remember

Florence Monsen, '49? She has just been made a director of the Boston Chapter of the American Marketing Association.

Enid Starr, 51? She is in charge of the new Wedding Gift Bureau for brides-to-be which Jordan Marsh Company, Boston, has just opened.

Mary Eugenia Parke, '29? She is the new editor of the book page in the Norfolk, Va. PILOT.

Mrs. Mirsky and admirers

Reba Paeff Mirsky, '24? Her book, THIRTY-ONE BROTHERS AND SISTERS, has been given the 1952 Charles W. Follett Award. A review says: "This is an unusual story, laid in South Africa, of Nom usa, a warm-hearted and also daring daughter of a Zulu chief."

Ruth E. H. Basius '38? She is assistant secretary and Washington representative of the California Eastern Airways, Inc. and a feature story about her entitled "'From Pre-Med to Airline Business for Ruth Basius" appeared recently in newspapers all over the country.

Jean Goodale Wales '35? She's with a Boston advertising agency; does a radio program for them.

The Changing World of Fashion

When Jean Page Lopardo (Mrs. Mario Lopardo) glances through a fashion magazine her interest is more than frivolous. A feminine Sherlock Holmes, the assistant in charge of costume and assistant to the Curator of Textiles at the Museum of Fine Arts, Boston, is spotting new lines, colors and fabrics inspired by the gowns and accessories of earlier days now in her charge.

As custodian of the lovely, and sometimes amusing costumes, Mrs. Lopardo has many a refurbishing trick up her sleeve. She has needed them all for the Museum's major fall exhibition, "The Changing World of Fashion."

She has her problems, too. For instance, mannequins had to be specially made the better to display the fashions from 1700 to 1940. But the model-maker just couldn't visualize 16 inch waistlines when the smallest contemporary ones are 22 inch for the junior miss!

Mrs. Lopardo's know-how has been a long time a-building. After graduation from Radcliffe in 1930, an anthropology major, she went to the Peabody Museum, her big project a synoptic exhibit; then to the Brooklyn Museum where she taught weaving, among other things. Returning to do graduate work at Radcliffe, she carried a full-time job at Peabody and then spent more than five years in New York, in charge of textile and costume exhibits at the Cooper Union.

She has been at the Boston Museum since 1941, commutes every day from the vicinity of Exeter, N. H. and finds her great interest in fabrics carries over to the nylon socks her 14-year-old son has been unable to break through in a year.

Costume exhibits are always popular, but they're not easy to engineer, is Mrs. Lopardo's word to Radcliffe alumnae who may be contemplating such a project in their towns. Generalizations on how to put clothes in condition are not possible but she will be glad to answer specific questions sent to the Museum.

If you're worried about Great-aunt Susie's wedding gown her suggestions may help.

Sorry: Wrong Titles

In our last issue, the article contrasting the 1952 welcome to freshmen to those of yesteryears, "Red Carpets: Old and New," identified Miss Mary Coes (not Coe) as Dean of the College and Mr. Arthur Gilman, the president when the class of 1894 were freshmen. In that year Miss Coes was actually Assistant Secretary and Mr. Gilman was Secretary. Our collective face is red. Please excuse.

Courtesy, Museum of Fine Arts, Boston

Mrs. Lopardo and friend

Mrs. Jordan Says:

that one of the most exciting activities at Radcliffe these days is the Massachusetts General Hospital-Radcliffe Coördinated Program in Nursing and no one seems to know about it! The twenty-eight undergraduates in the course would concur with both parts of that statement. They find their work and study at this great hospital interesting, stimulating, yes—even exciting.

Visitors to a Radcliffe dormitory may see fastened to a door, like a name-plate, a nurse's cap, not the version earned upon graduation from the course, but the small one worn by probationary students, a distinguishing mark in the hospital as well as in the dormitory corridor. The students have recently had an organizational meeting at the college to elect an executive committee and to strengthen their activities as a group both at Radcliffe and at the hospital.

The coördinated course in nursing is one of the programs which the Radcliffe administration supports in its endeavor to make available to women fields of education and opportunity for which they are peculiarly fitted. Unlike the summer courses in Publishing Procedures and Secretarial Studies, or the Management Training Program and the Radcliffe Seminars which are post-graduate, the Coördinated Program is a curricular program requiring regular admission to Radcliffe and running concurrently throughout the four undergraduate years.

Alumnae who are interested in the nursing program will find a detailed description of it in the Radcliffe catalogue and in a special bulletin entitled The Liberal Arts and Nursing Education: Radcliffe College and the Massachusetts General Hospital School of Nursing. Suffice it to say here that the program includes a full liberal arts course and a three-year course in nursing education and services with no compromise of either and yet with surprising integration. The present undergraduates are concentrating in Government, Biology, Social Relations, History, Psychology, fine areas of knowledge for professional women who will one day assume responsible roles of leadership in the world community. One of the General Education courses in the Biological Sciences at the College and also Chemistry 1 and a Social Relations course in psychology and sociology are part of the nursing curriculum for these students and thus meet

(*Continued on page five, column one*)

CLASS NOTES—SECOND EDITION

Mary Jane Wade '52, Class Secretary

It wasn't true

I had a feeling when I turned in our first edition of class notes that I had probably made at least one mistake even though I reread it several times, and by gosh, I was right. I reported that *Jane* Leonard has married Mr. James G. Zafris, Jr. As a matter of fact Jane Leonard has never even met Mr. Zafris, but *Joyce* Leonard met and married him and they are living happily ever after in Arlington, Virginia. Jim and Joyce are both working for the Government and Joyce is attending Georgetown, studying linguistics, in the evening. Sorry, Jane, Joyce, and Jim.

But this is

Here's a wedding on which I'm sure I have the "right dope" because I was there. On September 27, Connaught O'Connell and Gael Michael Mahoney, Yale, Harvard Law '52, were married in Boston. Alison Mathews was one of Connaught's bridesmaids and it was a lovely wedding. On the same day, Natalie Dosick was married at Appleton Chapel to Eric Solee, Harvard '52. Eric and Natalie should really have an honorary position among Harvard-Radcliffe couples because, if I remember correctly, they met at our Freshman Weekend (you remember "Alice at Radcliffe" weekend). Elizabeth Henry had a real Radcliffe wedding on November 1 when she was wed in Brookline to Jay W. Tracy, Jr., Yale '49, Harvard Law '52. Among the wedding party were her sister, Mrs. Winthrop D. Jordan (Pussy Henry), Ellen Guild, Joanne Callery, and Mary Burgwin. The Tracys will live in Denver, Colo. Way back on the 18th of June, Doris Jaffin was married to Leon Greenberg, Columbia '48, B.Architecture, Columbia '52 and an ensign in the Naval Reserve. I guess I didn't hear about it till now because the Greenbergs spent the summer in Europe.

Brides-to-be

Cynthia Wales became engaged recently to Oliver S. Taylor, Harvard '53 and Edith Morse, ex-Radcliffe, who graduated in June from Boston University is engaged to Robert J. Greene, University of Pennsylvania '50 and studying at Harvard Medical.

Work, work, work!

'52ers are doing everything! English majors are going to agricultural school, anthropologists are working in physics labs, architects are going to medical school. 42% of the class is "gainfully employed," 18% is going to graduate school of one sort or another, and only 8% does not want to work, most of them being mothers or wives who are working twenty-four hours-a-day as it is.* I'm devoting most of the column this time to jobs because I know everyone's interested, especially the "actives" (Appointment Bureau term for someone who's looking for a job.) The summer of "preparation" spent by Helen Puro, Nancy and Libby Hatch, and Jane Larsen paid off very well. Helen is an office manager at the Camden Motor Parts Company in New Jersey, Libby is a secretary at the Harvard Foundation for Advanced Study and Research, Nancy is a secretary at the Psych Laboratory at Harvard, and Janie Larsen is a secretary to Mrs. Jordan, I believe, at the Harvard Medical School. Ann Hunt has gone afield. She's a teller at the Bank of Hawaii in Honolulu. Helen Margolis, on the other hand, is working for the Wage Stabilization Board in the Office of Case Analysis. Believe it or not, Helen majored in Government and Ann in English, neither of them in Economics. As a matter of fact, that's a fairly typical situation. Sue Opdyke mentioned in a recent letter that Iris Washington is working in Nashville for Brush, Hutchison, and Gwinn, architects and engineers. She also reported that Motoko Fujishiro has returned to Tokyo. Sue herself is a "lowly assistant in the kindergarten" at the Southfield School in Shrevesport, La., where Leo is also teaching. Sue is "at long last having time on the side to be the kind of housewife that I've been wanting to be for ages!" Liz Tucker Herberich is employed at the Combustion Control Corporation in Boston which makes an electronic device called "fireye" (lower case *a la* e. e. cummings) which is attached to large oil burners and relights them when they go out or at least warns the owner of imminent disaster. Liz' job is to make sure all necessary materials are at hand at the proper moment so that "fireyes" are always watching as they should be. Her comment on her job was "terrifically interesting, with more than enough responsibility." Many more of our classmates are working in the Boston area. Rita Bagley, for instance, is a secretary in the Physics Department at Harvard, Phebe Crampton answers in a charming manner when you call Warren House (the English Department) and Nancy Keller is a biochemist working with Dr. Bering at the Medical School.

* All statistics are quoted from the Appointment Bureau's "Report on the Class of 1952" and are accurate as of November 1.

Crime and culture

Pam Bloedel (doing research at the Museum of Comparative Zoology at Harvard), and Mary St. John, who live downstairs from the class secretary were at last report more concerned about their *Crimson* which disappears before they get up in the morning than about their jobs, and who wouldn't be? Jane Sagendorph Germond and Nina Ratzersdorfer Masters are absorbing "culcha" at a great rate. Jane is working at the sales desk at the Boston Museum of Fine Arts, where she's helping to choose the Christmas cards the Museum sells and is learning about color reproduction and prints in general. Jane likes her work very much and she finds the visitors she meets even more interesting. Nina is a secretary at WGBH, the Lowell Institute station. She is in the office of both the head of "operations" and the head of "programs" so she gets a bird's-eye view of the entire organization. Nina is very enthusiastic about WGBH because it's a young group, trying to do a radically different job in an exciting field. Laurie Valtz, after a short stay with Porter Sargent is now working at MIT as secretary to an Italian Research Project, obviously closer to her heart. Ruth Prager has a fascinating job in the Bureau of Information for the Indonesian Government in New York, and Sally Cromwell is with SHAPE in Paris.

Of Portias, practitioners, and others

Not all the 52ers who are working are getting paid for it; a large part of the class is back at school. Carla Barron and Joanne Callery are both at Harvard Law and three members of the class are studying medicine, Ruth Jacobson at Berkeley, Estelle Radbill at Boston University, and Ellin Louria at the University of Pennsylvania. Many girls have come back to Radcliffe to study (and why not, isn't it the best grad school around?): Ursel Blumenheim, Alicia Hills, Theo Whatmough, Marianne Sorensen Linsley, Anne Landis McLaughlin, Barbara Sorenson, and Jane Johnson. Diana Stallings is at the School of Agriculture, University of North Carolina and Mary Burch Heeb is at the Simmons School of Social Work. Jule Unverferth is also at Simmons getting her M.A. in library science and Jule reports that Franny Harrold has a job for which Radcliffe really prepared her. She's in Washington working for a Navy man who's writing a history of the Navy. I always wondered why we had a swimming requirement and now I know; it's background for Franny's type of job!

(*Continued from page three*)
requirements at both institutions. During the college year the students take one course each year at the Hospital, given in one half day. Two summer courses of eight weeks each are scheduled during which the student lives at the Hospital. Following graduation from Radcliffe, the student spends the next year and a half in the nursing program, living at the Massachusetts General or one of the other hospitals during periods of affiliation. Though the total of five years and ten months may seem long as one launches forth on such a program, it is not when compared with the years of education and training required of men preparing for a profession. Nor is it long when one contemplates the kind of responsibility these young women are qualified to assume.

At first glance it may seem that the Radcliffe undergraduate in the nursing program is required to carry a schedule of work so heavy that she is denied time for social and extra-curricular activities. This is not true. Two years ago the editor of the Radcliffe News was a student nurse; a present officer of the Choral Society is in the nursing program, as are the social chairmen of two of the dormitories. One of the present juniors had a summer abroad this year, having spent the summer following her freshman year at the Hospital as she will the coming summer. She, incidentally, a concentrator in Government, hopes someday to do public health work in India.

Possible Changes

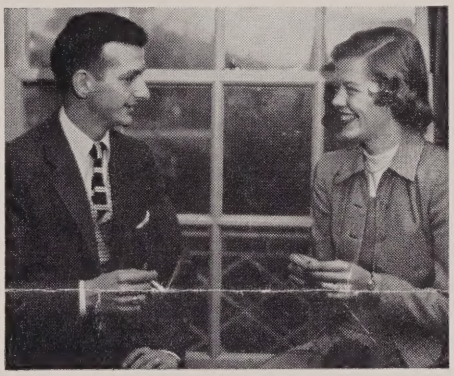
The Coördinated Program in Nursing is still in an experimental stage even though it is now in its seventh year. Changes in course requirement for the purpose of ever-closer integration will be made; changes in time schedules may be possible to encourage students to transfer into the program after the freshman year. Closer identification with the student nurse at the Hospital is evidently desirable since one of the first projects of the new M.G.H.-Radcliffe organization was the assignment of student-nurse sisters to the Radcliffe students so that the Radcliffe girls could take part in the student activities at the Hospital.

More applications for admission to this program would be highly desirable, for several reasons. One is that the program combines in admirable fashion the best of two possible worlds—(prejudice, maybe—but Radcliffe College and the Massachusetts General Hospital seem to some observers to be two rather fine institutions!) and more young women should know about this opportunity that is available to them.

Loss to the program because of marriage has been heavy. The proportion of girls in this group who marry before finishing is not greater than in the College as a whole, but it is more difficult to combine marriage and study in the nursing program than in the regular liberal arts course. But what a wonderful profession for a woman whether married or not, and what a role women so educated can fill in the home and in the fields of nursing education, nursing service, public health, community service, health legislation, to mention but a few.

"This is Radcliffe"

The present reviewer has two biases which may color her attitude toward "This is Radcliffe," a documentary film of undergraduate life recently released for private showing; one is a great enthusiasm for the subject matter, the other a gleeful liking for any production made on a Grade C budget which manages to be in some ways more satisfying than its much more elaborate counterparts.



Authors and producers

Holly Walker Butler '53 and her husband, Roger Butler, have produced a film and accompanying recorded script which convey the important core of a Radcliffe education as well as the peripheral delights and distractions. The language is that of undergraduates talking seriously about their college, explaining more simply and clearly than their elders usually manage to the things that need to be understood . . . "This is joint instruction . . . quite different from coeducation. The distinction is a source of pride to each school, for each enjoys its independence." "The General Ed. courses . . . will familiarize the Radcliffe freshman with areas outside her specific field . . . giving her perspective and a clearer sense of values." Occasionally the emphasis is refreshingly honest, even ingenuous: 'If she's not entertaining a friend, a student may study in the Yard or in the quiet of her room."

Pictorially Cambridge has the benefit of the doubt. Most of the scenes were shot during the season of apple blossoms and magnolias; even a rainy day is brightened by forsythia bushes as well as yellow and blue slickers. The river, the Harvard Yard, Radcliffe's dormitory quadrangle and yard bask in spring sunshine. Classes meet in the sunken garden, Choral sings on the steps of Moors, tennis courts are lively with the efforts of experts and novices.

The skill—and despite some difficulties with indoor shots, there is real skill apparent—of the photographer is not limited by ivy-covered confines but is directed also toward the organ-grinder with his monkey in Harvard Square, Taft politicking on the common, a "baby-sitter" at work and, in a really distinguished sequence, the familiar night lights of Boston.

Between the many scenes—a Student Government meeting, club activities, publications, social occasions as well as landmarks—are transitions, pleasant and functional, usually shots of students walking or bicycling from one place to another, from Longfellow to Fay House to the recently refurbished Library, from Moors Hall to the Harvard Yard and through the gate whose inscription invites "Enter to grow in Wisdom." Finally a Radcliffe senior walks into the sunset along the banks of the Charles "looking back upon a unique education, for she has been a member of a small woman's college freely drawing upon the academic resources of one of the world's greatest universities."

Orchids to Business Week

Big and little steel, railroads, retailers, and top executives all over the country learned about the Radcliffe Management Training Program in the October 11th issue of *Business Week* magazine. "How Much Do Women Need to Know" clearly defines the aims and aspirations of the Program, and the photographs tell the story in themselves. In traditional RE-NEWS fashion, we say orchids to the author, John Hartshorne, bright, young manager of the *Business Week* office in Boston.

(*Continued from page one, column one*)

Social life provided by the dormitories includes weekly *open house* (men may be entertained until midnight), and *jolly-ups* (informal dances) each term.

Destinations in the sign-out book may be very mystifying to the uninitiated. One is apt to see: □ (Harvard Square), └ (the Corner—anywhere on Massachusetts Avenue between Shepard and Linnaean streets), *UT* (University Theatre, movies in the Square), R^2 (Radio Radcliffe studios in Holmes Hall), *Pic Inn* (Picadilly Inn at the Hotel Continental), and *OG* (Oxford Grille).

We have our modern idiosyncrasies of speech, but through it all, the Radcliffe girl remains at heart a serious student and an adherent of "gracious living."

RADCLIFFE COLLEGE
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To forward,
add 3c postage.

Miss Lydia Garrison N
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"The Very Best Butter"

Lewis Carroll might have been describing Rags (from Ragnhild) Roberts when he wrote "the very best butter and beautifully done up." She is spontaneous and vivacious with a great deal of natural dignity, and is distinguished by her red hair and a voice that has as much color as her hair. She is as graceful in her Commonwealth Ave. apartment as Mrs. Matthew Roberts as she is efficient at Radcliffe as co-director with Mr. T. North Whitehead of the Management Training Program.

Born of Icelandic parentage, Mrs. Roberts grew up in a large family on a large farm in Minnesota. She earned a bachelor of science degree from the University of Minnesota in what proved to be the most appropriate training for her future career, economics and psychology.

Soon afterwards she startled the industrial world by being appointed at the age of 24 personnel manager of Kendall Mills, the Walpole, Massachusetts division of the Kendall Co. Responsible jobs in industry were rarely awarded to women in the thirties, particularly to one so young.

Her qualifications interested Miss Edith Stedman, director of the Radcliffe Appointment Bureau, who was at that time organizing the Management Training Program. Mrs. Roberts personified the aims of the Program, which was then and still is a pioneer course in the training of young women for junior administrative jobs in business and industry. Mrs. Roberts' association with the Program began in an advisory capacity at Miss Stedman's request, and officially developed over a period of five years until 1944 when she became co-director.

The curriculum of the MTP consists of six months of classroom work based on the case-study method and taught for the most part by members of the Harvard Business School. Two full-time job assignments when the students work on assembly lines in factories, on the selling floor in department stores, and on dietary staffs in hospitals are integrated into the academic work, and for this aspect of the curriculum Mrs. Roberts is primarily responsible. She believes that the on-the-job experience in both unskilled and supervisory capacities not only makes the academic work more realistic, but seasons the student for her future positions in the real world.

Rags

While rubbing elbows with both workers and administrators is perhaps the most valuable if not the most unique aspect of the Program, it is a tremendously demanding job for Mrs. Roberts. First, she must know each student's background and ambition in order to find her two jobs in two different organizations which will most contribute to her personal and professional development. Next, she must interest business, industrial, and non-profit organizations in employing students on a full-time basis for periods of a month in the fall and a month and a half in the spring. The cooperating firms, a listing of which would read like a page out of Dun and Bradstreet, are located primarily in New England, New York, Cleveland and Chicago.

The job facing Mrs. Roberts will be even greater next year with the expanded plans for the Program in view. The Harvard Business School is increasing its support of the Program, and expects to widen its participation in both teaching and recruiting. Fifteen full tuition fellowships are being offered for the next academic year. A conscientious effort is being made by staff, students, and alumnae to publicize the course throughout the country. For, as the president of Stroock Woolen Mills said recently, "The product is excellent, the marketing is poor."

Mrs. Roberts willingly admits that her job is very exciting. The excitement lies in a combination of the fun and responsibility of being in a new field, of seeing the demand for trained women increase and of seeing the young women fulfilling that demand. The four hundred alumnae of the Management Training Program might well look to her as a model product —able, gracious, and successful.

(*Continued from page one, column three*)

The lovely old house on Appian Way was the "Appian Way Club" for the graduate school during the harsh war years. As re-opened this fall, it is effectively redecorated. A tutorial secretary again presides at the House and offers morning coffee and afternoon tea to those who like to meet there. Many tutors, however, prefer still to meet their Radcliffe students in their Harvard offices. For sometimes even tutorial is now "joint."

Massachusetts General Hospital
October 23, 1945

To The Alumnae of the School of Nursing:

You have realized that the fall issue of the Quarterly Record has been delayed. This was because we wished it to contain an important announcement which could not be released until late in October.

Ever since the affiliation of the School of Nursing with Simmons College changed, we have known that one should be set up with another educational institution. For a considerable period of time a committee, comprised of representatives from the hospital trustees, medical staff, alumnae, leaders in education, and the director of the hospital, the principal, and the assistant principal of the School of Nursing, has been at work in an effort to bring about such an affiliation.

It is because the members of the committee know the satisfaction and pleasure which the results of their work will bring to you that they are delighted to announce that the Council of Radcliffe College and the Trustees of the Massachusetts General Hospital have authorized the establishment of a coordinated plan for the preparation of selected young women for the profession of nursing. With slight modification, the paragraphs that follow give the text of the article which was released to the press for publication on Sunday, October 21, 1945.

Further information relative to the program will be circulated through the Quarterly Record, the School Catalogue, and a brochure. We know, that given time to organize, the alumnae will give the program nation wide support through committees formed for such purposes as recruitment, scholarships and added endowment.

Sincerely yours,

Principal of School of Nursing

C O P Y

From RADCLIFFE COLLEGE

CAMBRIDGE, MASSACHUSETTS Mrs. Brewer Blackall
Director of Public Relations
Tel. KIRkland 4600

FOR RELEASE SUNDAY OCTOBER 21, 1945

CAMBRIDGE, MASS. A new coordinated plan for the training of selected young women who expect to make nursing their profession will be offered in September 1946 by Radcliffe College in cooperation with the Massachusetts General Hospital School of Nursing. This program will be unique in that it offers for the first time an opportunity to combine a complete liberal arts education leading to a bachelor's degree with professional education in nursing. Candidates who are admitted to this five and one-half year program will meet in every respect the requirements for the A.B. degree, and may choose freely among the twenty-five undergraduate fields of concentration offered by Radcliffe College. No pre-professional courses will be included in the college program which might in any way limit the breadth of general education.

Students who begin their course in September 1946 will carry full work at Radcliffe College for their first year and in addition will spend three hours a week at the Massachusetts General Hospital. During the next two and one-half years, including summer sessions, instruction will be given both at the college and at the School of Nursing, and at the end of three and one-half years the student will receive her bachelor's degree from Radcliffe. She will then spend two full years in the School of Nursing, receiving her nursing diploma at the close of this period.

MORE

Applicants will be admitted jointly by Radcliffe College and the School of Nursing and must meet the entrance requirements of both institutions. Joint admissions and supervisory committees will administer the program. Throughout the course there will be close integration between the college and the School of Nursing, with no sacrifice of requirements or standards on the part of either.

A nation-wide search for young women who will be outstanding candidates for this double program will be made. The Trustees of the Massachusetts General Hospital are prepared to offer a number of scholarships and loans to successful applicants and enrolled students who qualify for such aid, and all candidates enrolled will also be eligible for assistance from the Radcliffe College scholarship funds on precisely the same terms as other Radcliffe students.

This plan has been evolved as a result of the convictions of the governing boards of both institutions that the profession of nursing increasingly requires women with a broad educational background. Professional opportunities in hospital management, nursing and health education, and medical research more and more demand the graduate nurse who has the liberal arts training in addition to her diploma in nursing.

girls to register Monday. They were pretty serious—two blondes and two brunettes.

"This will be a very demanding course, you know. Actually the only thing that gives me concern is that during the whole 5½ years you will have only seven weeks of vacation a year—two weeks at Christmas, a week at Easter, and two before and after Summer work in the hospital.

To Choose Own Fields

For the first 3½ years the girls will live at Radcliffe, or in the case of the two girls from nearby, this year at least at home, commuting to Radcliffe. They are free to choose among the 29 undergraduate fields of concentration offered by Radcliffe, and will complete all requirements for the Radcliffe A.B. or S.B. degree. (The bachelor of science degree will not be governed by the work they take in Radcliffe, but by their college preparation in the classics, as at Harvard.) The only course that MGH recommends them to take at Radcliffe is chemistry.

"While the hospital expects these girls for a general orientation program one afternoon a week this year, it still will be possible for other freshmen to come into the combined course at the end of the first year," Dean Sherman explained. "We picked the best girls out of the applicants for the new course. Each has had to meet all the normal requirements for a freshman at Radcliffe."

Hope Ingersoll prepared at Putney and has entered the new course because "I like doctoring and nursing." Already, at 17, she has worked many hours as a volunteer at Tobey Hospital at Wareham "where they'd let us do any kind of work. I suppose we'll be much more limited to just what we're assigned here," she confessed as she walked down the long corridors of M. G. H. to meet Miss Sylvia Perkins, assistant director of the School of Nursing who was to begin the girls' orientation yesterday.

Earlier, as the girls listened to a Haydn symphony in the Sarah Wyman Whitman Room off the quiet Radcliffe quadrangle, Marjorie Otten explained that she always had wanted to study medicine. "But it takes too many years—10 at least, and this seemed to be a good way of doing what I wanted to do in less time."

"The demands of a career in nursing increasingly require more educational preparation for the nurse who is to keep pace with advances in medical science," Miss Sleeper said at the Massachusetts General. "The nurse, like other workers in the health field, needs a broad general education in addition to a sound professional one."

Radcliffe and the Massachusetts General Hospital School of Nursing, she continued, are looking "through a nation-wide search" for a group of young women able to meet "fairly rigorous requirements of physical and emotional maturity, who enjoy qualities of leadership, and who possess a sense of dedication to a great profession."

6 Girls to Study at Radcliffe, Mass. General at Same Time

ATENDING BOTH RADCLIFFE AND MASSACHUSETTS HOSPITAL—Miss Sylvia Perkins (right), assistant director of the School of Nursing at M. G. H., tells Suzanne Groll and Marjorie Otten about the orientation course this year in the hospital.

By FRANCES BURNS

For the first time in the history of female education girls are to work for a liberal arts A. B. and the white cap of a graduate nurse at the same time.

Six girls who were registered at Harvard's sister Radcliffe this week also were admitted by the School of Nursing of the Massachusetts General Hospital, third oldest private hospital in the United States. Before they were accepted by either institution they were interviewed, in the Summer, by Dean Mildred P. Sherman of Radcliffe and Miss Ruth Sleeper, director of the School of Nursing at M. G. H.

Three are from Massachusetts—Hope Ingersoll of Buzzards Bay, Mary Elizabeth King of Woodward road, West Roxbury, and Margaret Carnegie Ricketson of 9 West Cedar st., Beacon Hill. Elizabeth M. Fall is here from Asheville, N. C.; Suzanne Jean Groll from Bradfor Penn., and Marjorie Otten, Ke more, N. Y.

They will put in 5½ years of co lege and hospital work in a pione course that the two institutio hope later will turn out 12 con bined Radcliffe women and grad ate nurses every year.

"I hope you have awfully goo health," Miss Sherman said, as sh appraisingly looked at the first fou

Nursing

(Continued on Page 2)

NEW YORK HERALD TRIBUNE, SUNDAY, OCTOBER 21, 1945

Student Nurses To Get Regular Radcliffe A. B.

College and Massachusetts Hospital to Co-operate on 5½-Year Program

To provide a liberal arts education for young women who expect to make nursing their profession, Radcliffe College, in cooperation with the Massachusetts General Hospital will offer in September, 1946, a five-and-one-half-year program leading to an A. B. degree and a nursing diploma.

Candidates who meet the requirements for the A. B. degree may choose freely among the twenty-five undergraduate fields of concentration offered by Radcliffe. These students will carry full work at the college their first year and in addition will pass three hours a week at the Massachusetts Hospital. During the next two and a half years, including summer sessions, instruction will be given both at the college and the School of Nursing.

At the end of three and a half years, the student will receive her bachelor's degree from Radcliffe. She will then attend the School of Nursing, receiving her nursing diploma at the end of two years.

This plan resulted from the conviction of the governing boards of both institutions that the nursing profession increasingly requires women with a broad education.

A nation-wide search for outstanding candidates will be made. Applicants will be admitted jointly by Radcliffe College and the School of Nursing.

The trustees of the Massachusetts General Hospital are prepared to offer financial aid to successful applicants, who will also be eligible for assistance from Radcliffe College scholarship funds on the same terms as other Radcliffe students.

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France Votes Today

Harvard Tucks 11,700 Men Into Its Classrooms

50 P.C. Increase Taxes University; Radcliffe Accepts 1200 Students

(Following is the first of a series of articles on Greater Boston colleges and universities as they tackle the problems of the first post-war year.)

By RUTH MILLER

It was a tight squeeze today—but Harvard made it.

The university welcomed 11,700 men to its college and graduate schools and tucked them into its classrooms somehow.

50 PER CENT INCREASE

If the fathers or grandfathers of any of the students starting classes today had been on hand they would have been aghast at the shuffle. Harvard was never like this in their day.

For Harvard had a flat 50 per cent. increase in its normal population of students. Moreover, it had nearly 9000 young men, and some not so young, who had preliminary educations in all parts of the globe as students of the art of warfare. Many of her new sons had been subjects of "higher education" before their military service but others had never dared hope for the opportunity that was now theirs by virtue of the "G-I Bill of Rights."

The college itself echoed to the eager, first-day greetings of 5,300 men. The administrators of her graduate schools found their desks buried with the paperwork to chart the educations of equally record numbers. At the Graduate School of Arts and Sciences, the academic pathway had to be prepared for 1,600 men while the law school was readying itself for 1,500 prospective lawyers who will start the semester later than the rest of the university.

At the medical school, the enrollment was 520. Three hundred students were working toward degrees in engineering, 60 in education, 85 in public health, 85 in divinity, and 48 in dental medicine.

MANY NEW PROFESSORS

Meanwhile, faculty members had another task—that of learning to know the many new professors, instructors and administrations. The staff that was able to serve 8583 men in 1938, 7990 men in 1939 and 7665 men in 1940, was not equal to this year's peak. Many of the reinforcements were themselves veterans.

Students, like those in so many other parts of the country, had topics of conversation today that probably seldom arose during their parents' educational days.

"Have you any place to live yet?" was one.

"How are you making out on your $90 a month government check?" was another.

Although the college itself had divided its living space to house the maximum number of single men and provided some married veterans with housing at Fort Devens and on the Charles, many students were still ready to cut classes at the hint of an apartment.

Meanwhile, at nearby Radcliffe, about 50 veterans of the women's service donned skirts as plaid as those of the recent high school graduates.

Civilians and veterans who listened to their first lecture at Radcliffe today did so with special pride. They were the envy of many for although the school had accepted 1200 students it had turned away thousands more.

MANY GIRLS COMMUTING

Radcliffe too had housing trouble Contrary to its usual custom, it requested all students who could, to live at nome, so that nearly half are commuting. It has scoured nearby community to find suitable private rooms for those out-of-towners who could not be accommodated at the dormitories.

At Radcliffe and at Harvard several entirely new educational programs had their initiation today. Both were starting on an experimental basis the new general education program that resulted from the report on "General Education in a Free Society" produced last year by a Harvard committee. Limited numbers of freshmen and sophomores were enrolling in elective courses in the humanities, the social and natural sciences.

Harvard students were also "pioneers" in a new department of social relations which was created last January. This unites the traditional subject-matter of sociology and social ethnics with portions of psychological and anthropological science.

"WOMEN IN WHITE"

"Women in white" enrolled at Radcliffe for the first time. They are students in the new nurses training program which the college is offering in cooperation with the Massachusetts General Hospital Nursing School.

At Radcliffe, as at Harvard, history and government courses had new popularity as a result of the international situation. English, which had taken a popularity slump during the war, was back stronger than ever at Radcliffe, while sociology, always a favorite among the women, maintained its appeal. Philosophy, which has not always had many adherents among undergraduates, drew a large number this year.

A new dean of instruction was among the staff members at Radcliffe today. She is Mrs. Wilma Anderson Kerby-Miller. She will be responsible for the organization and administration of the new advisory system.

HARVARD

New York, Oct. 14, 1945. H-Tribune

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Wells Coll

Radcliffe Course For Nurses

Herald - Oct. 21, 1945

A new co-ordinated plan for the training of young women who hope to make nursing their profession will be offered next September by Radcliffe College, in co-operation with the Massachusetts General Hospital School of Nursing, it was announced yesterday.

The program will be the first to offer an opportunity to combine a liberal arts education leading to a bachelor's degree with professional education in nursing. Candidates admitted to the 5½-year course will meet in all respects the requirements for the A. B. degree and may choose freely among the 25 undergraduate fields of concentration offered by Radcliffe.

Applicants will be admitted jointly by Radcliffe and the School of Nursing. Trustees of the hospital are prepared to offer substantial financial assistance to successful applicants for admission, and all candidates enrolled will also be eligible for aid from Radcliffe College scholarship funds.

Radcliffe to Have Training in Nursing

Boston Post 10/21/45

Beginning next September, Radcliffe College will offer in conjunction with the Massachusetts General Hospital School of Nursing a new program which will enable students to combine a liberal arts course with training in nursing leading to a bachelor's degree.